

PO3000055623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

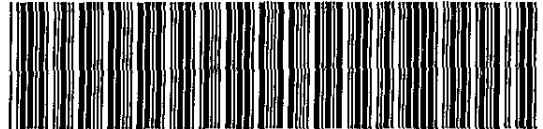
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
HALLMARK CENTER
COLUMBIA, MO 65201

✓

GS/36

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Papa's Pool Service, Inc.
(PROPOSED CORPORATE NAME - **MUST INCLUDE SUFFIX**)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Joseph L. Leto
Name (Printed or typed)

3206 Beacon Street
Address

Pompano Beach, FL 33062
City, State & Zip

561-248-6680
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Papa's Pool Service, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3206 Beacon Street Pompano Beach, Florida 33062

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Pool Cleaning Service

ARTICLE IV SHARES

The number of shares of stock is:

One Hundred (100) Of No Par Value

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Joseph L. Leto 3206 Beacon Street Pompano Beach, Florida 33062

Lisa M. Orth 3206 Beacon Street Pompano Beach, Florida 33062

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

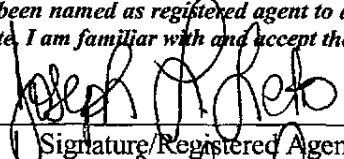
Joseph L. Leto 3206 Beacon Street Pompano Beach, Florida 33062

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joseph L. Leto 3206 Beacon Street Pompano Beach, Florida 33062

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Signature/Incorporator

FILED
03 MAY 12 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Date



Date