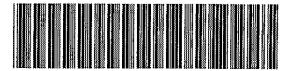
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Certified Copies	fied Copies Certificates of Status		
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TRANSMITTAL LETTER

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

SUBJECT: S	AFE POOLS INC		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
☐ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	Stransfer	\$87.50 Filing Fee, Certified Copy & Certificate o Status PY REQUIRED
FROM:	PAMELA TROYER		
** x	Name	(Printed or typed)	
	1569 SHADOW RIDGE	CIR	
		Address	
	SARASOTA FL 34240		
	City	, State & Zip	
	941-378-4171		
	Daytime	Telephone number	··· <u>·</u>

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:

SAFE POOLS INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2236 VINTAGE ST SARASOTA FL 34240

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR THE PURPOSE OF TRANSACTING ANY OR ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is:

10,000 SHARES OF \$0.01 PAR VALUE COMMON STOCK.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

MARTHA HOSTETLER 2236 VINTAGE ST SARASOTA FL 34240 GLEN HOSTETLER 2236 VINTAGE ST SARASOTA FL 34240

ARTICLE VI REGISTERED AGENT

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

MARTHA HOSTETLER 2236 VINTAGE ST SARASOTA FL 34240

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARTHA HOSTETLER 2236 VINTAGE ST SARASOTA FL 34240

10-12-03

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