

PD4000031173

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

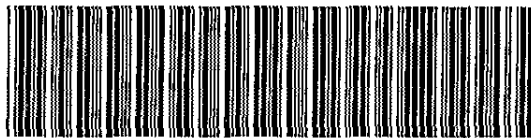
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Amanda _____ GAVE
AUTHORIZATION BY PHONE TO
CORRECT *1-7-04* _____
DATE *1-7-04* _____
DOC. EXAM *1-7-04* _____

Office Use Only

[Signature]



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02/11/04--01031--008 **87.50

2004 FEB 11 P 1:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

TRANSMITTAL LETTER

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

SUBJECT: HydraSource Distributors

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

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

FROM: Amanda Schamback
3580 S.W. Sunset Trace Circle
Palm City, FL 34990
(772) 708-2880

ARTICLES OF INCORPORATION

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

Article I: Name of Corporation

HydraSource Distributors Inc.

Article II: Principal Place of Business

3580 S.W. Sunset Trace Circle
Palm City, FL 34990

Article III: Mailing Address

P.O. Box 1832
Palm City, FL 34991

Article IV: Purpose

Any and all lawful business

Article V: Authorized Shares of Stock

1,000,000 (one million)

Article VI: Registered Agent

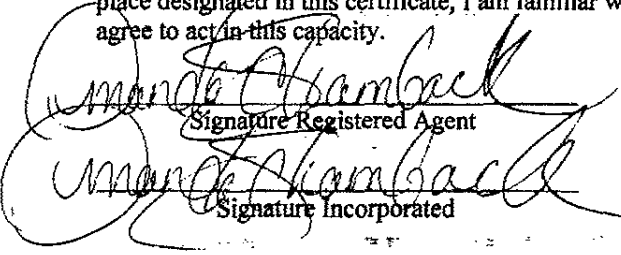
Amanda Schamback
3580 S.W. Sunset Trace Circle
Palm City, FL 34990

Article VII: Incorporator

Amanda Schamback
3580 S.W. Sunset Trace Circle
Palm City, FL 34990

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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 Incorporated

2/9/04
DATE

2/9/04
DATE