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Return Name and Address BOUACARO WATER SYSTEMS

5590 BLCON RD N. PSRS. FC 34287

Date

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Articles of Incorporation

Dear Sir:

Enclosed please find an original and one copy of Articles of Incorporation along with total filing fees of \$70.00.

Please file and provide a filed copy to me, together with any other information you commonly provide to new incorporators at the address above.

Please contact me at the above address if you require anything further. My daytime telephone number is 74/628 5223

With kindest regards, I am

Sincerely yours,

Signature

Enclosures Check # 1063 Enclosed for \$ 70 5



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 18, 2004

AQUACARE WATER SYSTEM 5590 ALLEN ROAD NORTH PORT, FL 34287

SUBJECT: AQUACARE WATER SYSTEMS

Ref. Number: W04000007017

We have received your document for AQUACARE WATER SYSTEMS and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6904.

Letter Number: 704A00011221

Freida Chesser Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF INCORPORATION FLORIDA STOCK CORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit), the undersigned would state:

ARTICLE I NAME

The name of the corporation shall	be:		
AQUALARE WATER	Systems INC		TALL MI
AF	RTICLE II PRINCIPAL	OFFICE	OH FEB 23
The principal place of business/m principal office and, if different, the	` `		
5590 ALLEN RD. N. PERT, FL 34287		<u> </u>	50
N. PORT, FL 34287			<u></u>
	ARTICLE III PURPO	SE	
The purpose for which the corpora	ation is organized is:		
SALF OF WATER SY	STEMS		· · · · · · · · · · · · · · · · · · ·
	ARTICLE IV SHARI	E S	
The number (and classes, if any) o	of shares the corporation	is authorized to issue is (are):	
Number of shares authorized	Class(es)	Par Value	
	-	_	
		····	

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es) of the initial officers and directors are:

Directors	
Name	Address
<u> </u>	
···	
Officers	
President:	DAVID É MUNGER Name 5590 BLLETY RD N. PORT. FL 37287
Secretary/Treasurer:	BECKY FEAGAN Name 6590-BLICN RD N. FORT, FC 34207
Vice-President:	LATARUM FISCHER Name 35 CAPPY RD ROTONDA W. FL 33557

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

DAVID & MUNGER	
6590 BLUEN RD	
N. PORT, FC 34297	

ARTICLE VII INCORPORATOR

5590 BLIEN RD	
7-2	
N. PORT, RE 34287	

Having been named as registered agent and 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	2/10/04
Signature/Registered Agent	Date
Signature/Registered Agent	Date

The name and address of the Incorporator is:

OI. SER 23 PM 2:50