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PICK-UP	☐ WAIT	MAIL	
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SECRETARY OF STATE
TANDARD SECRETARY

M1309

TRANSMITTAL LETTER

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

SUBJECT:	Paradise Pools of Florida, Inc			
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	rinal and one (1) copy of the ar	ticles of incorporation and	l a check for:	
☑ \$70.00 Filing Fee	☐ \$78.75 Filing Fee	□ \$78.75 Filing Fee	□ \$87.50 Filing Fee,	
Timig t co	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status	
		ADDITIONAL CO	DPY REQUIRED	
FROM:	William L S	cartozzi		
	Nam	e (Printed or typed)		
	PO Box	246		
		Address		
	Homosassa, Fl	34487		
•	City	, State & Zip		
	352-613-	-5242		
	Daytime	Telephone number		

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 1, 2004

WILLIAM L SCARTOZZI PO BOX 246 HOMOSSA, FL 34487

SUBJECT: PARADISE POOLS OF FLORIDA, INC.

Ref. Number: W04000012754

We have received your document for PARADISE POOLS OF FLORIDA, INC. 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

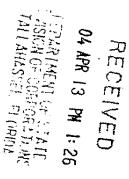
Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6928.

Tim Burch Document Specialist New Filings Section

Letter Number: 104A00021335





FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

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Letter Number: 104A00021335

ARTICEES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Paradise Pools of Florida, Inc.

CITRUS

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

PO Box 246

Homosassa, Fl034487

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

To Conduct Lawful Business

ARTICLE IV SHARES

The number of shares of stock is: 500 Shares of Common Stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): William L Scartozzi, Director, President, Secretary

REGISTERED AGENT

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

William L Scartozzi 5635 S Park Hill Way Homosassa, FI 34448

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

William L Scartozzi 5635 S Park Hill Way Homosassa, Fl 34448

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

3/20/04 Signature/Registered Agent Date 3/20/04 Signature/Incorporator Date

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