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SECRETARY OF THE SECRET

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TRANSMITTAL LETTER

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

SUBJECT: MIKE DEVANE'S POOL SERVICE INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original	ginal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	MIKA DEVANE Name	(Printed or typed)	
	6302 OLVE AV	Address	
	Saragota FL City,	34231 State & Zip	
	941-704-59 Daytime T	elephone number	

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

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ARTICLES OF INCORPORATION		
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)		
· · ARTICLE INAME		
The name of the corporation shall be:		
MIKE DEVANE'S Pool SERVICE INC		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 6302 Olive AVE		
59RASOFA FL 34231		
ARTICLE III PURPOSE The purpose for which the corporation is organized is: for Cleaning Pools		
ARTICLE IV SHARES The number of shares of stock is:		
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): MIKE DEVIANTE 630 Z OLUE AUE Supersofur FL 34231		
Supersofur FL 34231	041	
ARTICLE VI REGISTERED AGENT	14 MAY -7	CE
The <u>name and Florida street address</u> of the registered agent is:	<u>.</u> .	
Mike DevANG	P	
(0301 0(104 AUG		in .
ARTICLE VII INCORPORATOR	80:	<u></u>
The <u>name and address</u> of the Incorporator is:		
MIKE DEVANE		
52RAJETA FL 34231		
**************************************	*********	*
Having been named as registered agent to accept service of process for the above state certificate, I am familiar with and accept the appointment as registered agent and agree		this
Mule Die au	5-4-04 Date	
Signature/Registered Agent Mika De Jan 19		
The Duran	5-04-04	
Signature/Incorporator	Date	