# P04000/2/00/

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# TRANSMITTAL LETTER

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

SUBJECT: FANTA	STIC POOL SERVICE INC. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00	<b>☑</b> \$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
rang rec	& Certificate of Status	& Certified Copy	
		ADDITIONAL CO	PPY REQUIRED
FROM: S.	Lee McCracken		
	Name	(Printed or typed)	
	4621 S.W. 106th Pl.		
		Address	
	Ocala, FL 34476		
		, State & Zip	
	352-237-4006		
		l'elephone number	<del> </del>

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:

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Fantastic Pool Service, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4621 S.W. 106th PL. Ocala, FL, 34476

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: pool maintenance service

### ARTICLE IV SHARES

The number of shares of stock is: 100 (one hundred)

# INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

S.Lee McCracken president/treasure 4621 S.W 106th PL. Ocala, FL. 34476

Suzanne A. McCracken

VP/secretary

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Debbie Mendelsohn 16192 73rd Ct N. loxahatchee, FL. 33470

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

S.Lee McCracken 4621 S.W. 106th Place Ocala FL, 344476

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, Lam familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

S-18.04 Date