

P04000159621

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

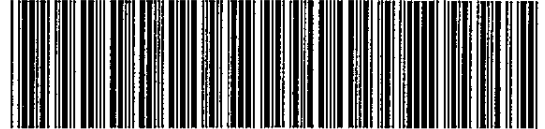
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100042788661

11/18/04--01039--008 **78.75

FILED
04 NOV 18 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C.F. 11/24

TRANSMITTAL LETTER

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

SUBJECT: ALL ABOUT POOL MANAGEMENT OF THE TREASURE COAST, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: LILI GONZALEZ

Name (Printed or typed)

561 SE RON RICO TERRACE

Address

PORT ST. LUCIE, FLORIDA 34983

City, State & Zip

772-528-9985

Daytime Telephone number

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:

ALL ABOUT POOL MANAGEMENT OF THE TREASURE COAST, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

561 SE RON RICO TERRACE
PORT ST. LUCIE, FLORIDA 34983

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

POOL SERVICE/MAINTENANCE

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

EMILIO GONZALEZ - PRESIDENT

KARL K. SHOWEN - VICE PRESIDENT

LILI GONZALEZ - SECRETARY/TREASURER

ARTICLE VI REGISTERED AGENT

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


LILI GONZALEZ
561 SE RON RICO TERRACE
PORT ST. LUCIE, FLORIDA 34983

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LILI GONZALEZ
561 SE RON RICO TERRACE
PORT ST. LUCIE, FLORIDA 34983

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 & INCORPORATOR



Date

FILED

04 NOV 18 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA