

POS000014835

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

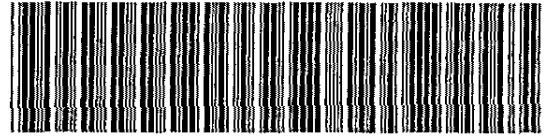
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200045177342

02/10/05--01017--015 \*\*35.00

FILED  
05 FEB 10 PM 3:16  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

Ps 2/16/05  
A. J. Core

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** POOL DECK SOLUTIONS, INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P05000014835

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RICK BARBER

(Name of Person)

POOL DECK SOLUTIONS, INC.

(Name of Firm/Company)

12 N FILLMORE STREET

(Address)

BEVERLY HILLS, FL 34465

(City/State and Zip Code)

For further information concerning this matter, please call:

BOB COHEN, AGENT

(Name of Person)

at ( 352 ) 637-1122

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Street Address:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

## ARTICLES OF CORRECTION

for

POOL DECK SOLUTIONS, INC.

Name of Corporation as currently filed with the Florida Dept. of State

P05000014835

Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These Articles of Correction correct ARTICLES OF INCORPORATION

(Document Type)

filed with the Department of State on JANUARY 24, 2005

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

DID NOT REGISTER ADDITIONAL DIRECTOR

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

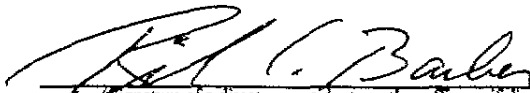
FILED  
05 FEB 10 PM 3:16  
TALLAHASSEE, FLORIDA  
DEPT. OF STATE

Correct the inaccuracy, incorrect statement, or defect:

NEED TO ADD AN ADDITIONAL DIRECTOR TO THE CORPORATION...

ADD: SCOTT BARBER, 12 N FILLMORE ST., BEVERLY HILLS, FL 34465

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

RICK BARBER

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)