

PO5000073655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

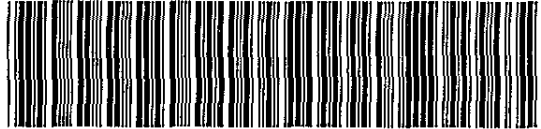
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/20/05--01014--012 **70.00

FILED

05 MAY 20 AM 10:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

05 MAY 20 AM 10:12

DEPUTY SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Arundel Pools 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: Jon Klein
Name (Printed or typed)

107 Shadow Lake Dr.
Address

Longwood, FL 32779
City, State & Zip

407-389-0108
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)

FILED

05 MAY 20 AM 10:13

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Arundel Pools, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

107 Shadow Lake Drive
Longwood, FL 32779

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Handyman work

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):

Jon Klein, Presid. & Treasurer
Clint Atwater, Secretary
107 Shadow Lake Dr
Longwood, FL 32779

ARTICLE VI REGISTERED AGENT

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

Jon Klein
107 Shadow Lake Drive
Longwood, FL 32779

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jon Klein
107 Shadow Lake Dr.
Longwood, FL 32779

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

Signature/Incorporator

5/20/05

Date

5/20/05

Date