

P05000081338

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

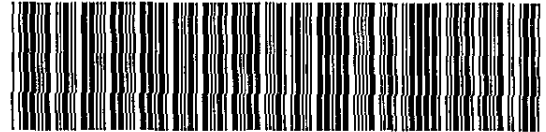
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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6-7-05

TRANSMITTAL LETTER

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

SUBJECT: E & M Pool Services
(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: Edgardo Leon
Name (Printed or typed)

2325 Water View loop
Address

Kissimmee, Florida, 34743
City, State & Zip

(407) 344-9281 - (407) 319-2170
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:

E & M Pool Services Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2325 Water View loop
Kissimmee, FL 34743

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Pool maintenance and cleaning

ARTICLE IV SHARES

The number of shares of stock is:

10,000 SHARES AT A PAR VALUE OF \$1.00 EACH.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Edgardo LEON (PRESIDENT) Melina LEON (vice president)
2325 Water View loop
Kissimmee, FL 34743

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Edgardo LEON (REGISTERED AGENT)
2325 Water View loop
Kissimmee, FL 34743

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Edgardo LEON (INCORPORATOR)
2325 Water View loop
Kissimmee, FL 34743

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

5-27-05

Date



Signature/Incorporator

5-27-05

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA