

P05000121925

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

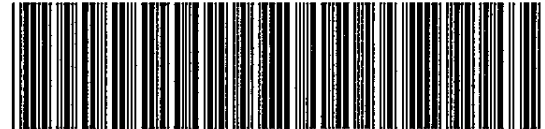
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100059173631

09/06/05--01009--025 **87.50

FILED

05 SEP -6 PM 4:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/6/05
BLK

TRANSMITTAL LETTER

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

SUBJECT: Pool Supply Delivery Services, 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: Jennifer Christine Smith

Name (Printed or typed)

PO Box 510907

Address

Punta Gorda, FL 33951-0907

City, State & Zip

941-815-1726

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:

Pool Supply Delivery Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

PO BOX 510907
Punta Gorda, FL 33951-0907

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Deliver pool maintenance materials

ARTICLE IV SHARES

The number of shares of stock is:

50

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Jennifer Christine Smith
PO Box 510907
Punta Gorda, FL 33951-0907
President, Vice President, Treasurer, & Secretary

ARTICLE VI REGISTERED AGENT

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

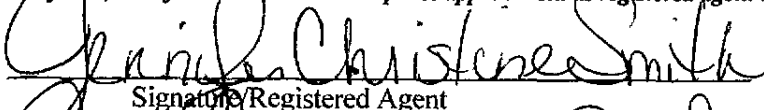
Jennifer Christine Smith
16396 Perico Way
Punta Gorda, FL 33955

ARTICLE VII INCORPORATOR

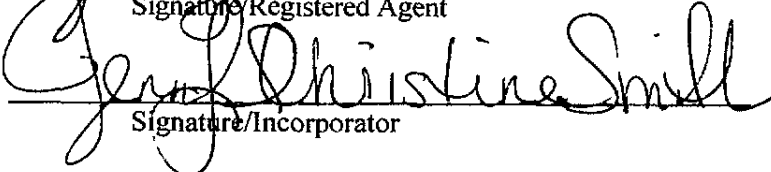
The name and address of the Incorporator is:

Jennifer Christine Smith
PO Box 510907
Punta Gorda, FL 33951-0907

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


Date


Signature/Incorporator


Date

FILED

05 SEP -6 PM 4: 10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA