P07000009548

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Do	cument Number)		
Certified Copies	_ Certificates o	f Status	
Special Instructions to Filing Officer:			
Office Use Only			
	J		



700084608527

01/22/07--01005--002 **70.00

2007 JAN 22 PH 2: 33

T. Burch JAN 2 3 2007

COVER LETTER

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

SUBJECT:	Boa & Pool M	Medic Ir	nc.
,	(PROPOSED CORPORAT	FE NAME – <u>MUST INCL</u> I	<u>UDE SUFFIX</u>)
Enclosed are an orig	rinal and one (1) copy of the artic	les 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
		ADDITIONAL CO	Status PY REQUIRED
FROM: Joseph Ulman Name (Printed or typed) 2103 Saunders Rd Address Zephyrhills Fl. 33540 City, State & Zip 813-270-3550			
•	Daytime Telephone number		

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION	FILEU
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	2007 JAN 22 PM 2: 33
The name of the corporation shall be: Specifical Medic, Inc.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 2100 SQUINCEYS FO. ZEPHYPHILS FI. 33540 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Spa and Pool repair/maintane	LE
ARTICLE IV SHARES The number of shares of stock is: 1000 Shares	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): JOSEPH Ulman (President) Jan 2100 Saundes Ru Zephyrhills F1 33540	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the street address (P.O. Box NOT	he registered agent is: ***********************************
Having been named as registered agent to accept service of process for the above s certificate, fam familiar with and accept the appointment as registered agent and ag	stated corporation at the place designated in this gree to act in this capacity
Signature/Registered Agent Toggin G MIMIAN	Date
Signature/Incorporator Joseph G. UIMAN	Date

FILED