# P0700042640

(R	equestor's Name)	· · · · · · · · · · · · · · · · · · ·	
(A	ddress)		
(A	ddress)	· 	
		-46	
(U	ity/State/Zip/Phone	∋#)	
PICK-UP	☐ WAIT	MAIL	
(B	usiness Entity Nan	ne)	
(De	ocument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			





700089130907

02/26/07--01013--012 \*\*78.75

O7 APR -5 PH 4: 19 SECRETARY OF STATE



# **COVER LETTER**

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

SUBJECT: PH	PLUS POOLS & SPAS II	NC	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	₹78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	NINO CALABRESE & ASSO		
	Name (	(Printed or typed)	
433 W DELILAH ROAD Address			
	PLEASANTVILLE, NJ 0823		
	609-646-8299  Daytime Te	elephone number	

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



March 19, 2007

NINO CALABRESE & ASSOCIATES INC 433 W DELILAH ROAD PLEASANTVILLE, NJ 08232

SUBJECT: PH PLUS POOLS & SPAS INC

Ref. Number: W07000013245

We have received your document for PH PLUS POOLS & SPAS INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call 850-245-6052.

Paisley A Alford New Filing Section Division of Corporations

•

Letter Number: 807A00018848

#### 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:

PH PLUS POOLS & SPAS INC

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 5174 NORTHRIDGE ROAD, UNIT 209 SARASOTA, FL 34238

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

POOL AND SPA INSTALLATION AND MAINTENANCE

# ARTICLE IV SHARES

The number of shares of stock is:

200 SHARES COMMON STOCK, NO PAR

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PAUL J HUDSON: PRESIDENT

5174 NORTHRIDGE ROAD, UNIT 209

SARASOTA, FL 34238

## ARTICLE VI REGISTERED AGENT

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

PAUL J HUDSON, PRESIDENT 5174 NORTHRIDGE ROAD, UNIT 209 SARASOTA, FL 34238

# ARTICLE VII INCORPORATOR

Signature/Incorporator

The name and address of the Incorporator is:

NINO CALABRESE & ASSOCIATES, INC

433 W DELILAH ROAD

PLEASANTVILLE, NJ 08232

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

3/30/07

Date

3/26/07

Dat