

P08000041632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

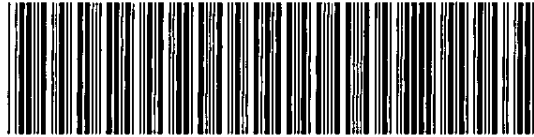
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200125246562

04/24/08--01013--020 \*\*87.50

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 APR 24 PM 4:22

4/24/08

**COVER LETTER**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 APR 24 PM 4:22

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

**SUBJECT:** Poolsource America, 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:** Nancy Youngs

Name (Printed or typed)

317 Lenain Dr.

Address

Nokomis, FL 34275

City, State & Zip

(941) 735-0775

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:

**Poolsource America, Inc.**

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

317 Lenain Dr.

Nokomis, FL 34275

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Cleaning and maintaining pools.

## **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):

Nancy Youngs (President)

317 Lenain Dr.

Nokomis FL 34275

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 APR 24 PM 4:22

**ARTICLE VI REGISTERED AGENT**

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

William Nahs  
317 Lenain Dr.  
Nokomis, FL 34275

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Nancy Youngs  
317 Lenain Dr.  
Nokomis, FL 34275

\*\*\*\*\*

*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*



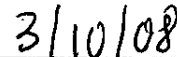
Signature/Registered Agent



Date



Signature/Incorporator



Date

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 APR 24 PM 4:22