# P10000102349

(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

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EFFECTIVE DATE 12/31/10



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D. BRUCE
DEC 21 2010

**EXAMINER** 

# **COVER LETTER**

Division of C				
SUBJECT: Aldern	nan Technologies, Ir	nc		
		Resulting Florida Profit Cor	poration	<del></del>
	icate of Conversion, A tity" into a "Florida Pro			
Please return all corr	respondence concernin	g this matter to:		
Brian Alderman				
	Contact Person		نمرية خبي	-
Alderman Techi	nologies, Inc.			
	Firm/Company			
2760 14th Ave, SE				
	Address			70 C
Naples, FL 34117				FILE DEC 20 PHILE HASSEE, FL
	City, State and Zip Code			SEE O
brian@clearpools E-mail address: (to	sandspa.com be used for future annual r	eport notification)		PILED  10 DEC 20 PH 12: 35  LUAHASSEE, FLORID,
For further informat	ion concerning this ma	tter, please call:		_ <b>v</b>
Brian Alderman		at ( 239 ) 216	-2609	
Name of Co	ntact Person	Area Code and Dayti	me Telephone Number	<del></del>
Enclosed is a check	for the following.amou	int:.		
<b>☑</b> \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing Fees and Certified Copy	\$122.50 Filing Fees Certified Copy, and Certificate of Status	3,
STREET ADDRES Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions	MAILING A Registration of C Division of C P. O. Box 63 Tallahassee,	Section Corporations 27	

Tallahassee, FL 32301

### **Certificate of Conversion**

For

# "Other Business Entity"

Into

# Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
Clear Pools and Spa, LLC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a limited liability company LM 0000 3793  (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Florida  (Enter state, or if a non-U.S. entity, the name of the country)
on June 30, 2009
Enter date "Other Business Entity" was first organized, formed or incorporated &
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> :
Alderman Technologies, Inc.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: December 31, 2010  (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the conversion.
7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

Page 1 of 2

EFFECTIVE DATE 12 31 10

currently organized, formed or incorporated.

f Florida Limited Partnership or Limited Liability Limited Partnership:  lignatures of ALL General Partners.  f Florida Limited Liability Company:  lignature of a Member or Authorized Representative.  All others:  lignature of an authorized person.	•	
signature:  Signat	Signed this 16 day of December	, 20_10
signature:  Signat	Description I Clarester Co. File 12 Description	,
signature:  Signat	Required Signature for Florida Profit Corpora	ation:
Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:  Printed Name: Brian Alderman  Required Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in .8.17.155, F.S. [See below for required signature(s).]  Signature:  Printed Name:  Title: Managar  Signature:  Printed Name:  Title:  Signature:  Signature:  Title:  Signature:  Signature:  Title:  Signature:  Signature:  Signature:  Title:  Signature:  Signature:  Title:  Signature:  Signature:  Signature:  Signature:  Title:  Signature:  Signatur	marriada signing armins that the facts stated in	and document are true. They hade information constitutes
Required Signature(s) on behalf of Other Business Entity; Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]  Signature:  Trinted Name fran Alderman  Title: Manager  Signature:  Trinted Name:  Tritle:  Signature:  Tritle:  Tritle:  Signature:  Tritle:  Tritle:  Signature:  Tritle:  Tritle:  Signature:  Tritle:  Signature of an effect Liability Company:  Signature of an Alderman  Signature of an authorized Representative.  All others:  Ignature of an authorized person.	a third degree felony as provided for in s.817.155	, F.S.
Required Signature(s) on behalf of Other Business Entity; Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]  Signature:  Trinted Name fran Alderman  Title: Manager  Signature:  Trinted Name:  Tritle:  Signature:  Tritle:  Tritle:  Signature:  Tritle:  Tritle:  Signature:  Tritle:  Tritle:  Signature:  Tritle:  Signature of an effect Liability Company:  Signature of an Alderman  Signature of an authorized Representative.  All others:  Ignature of an authorized person.	Signature of Chairman Vice Chairman Director	Officer or if Directors or Officers have not been
Required Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in it.817.155, F.S. [See below for required signature(s).]  Signature:  Tritle: Manager  Signature:  Tritle: Tritle:  Signature: Tritle:  Signature: Tritle:  Florida General Partnership or Limited Liability Partnership:  Signature of one General Partners.  Florida Limited Partnership or Limited Liability Limited Partnership:  Signature of a Member or Authorized Representative.  All others:  Signature of an authorized person.  Sees:  Certificate of Conversion: \$35.00	selected an Incorporator:	Officer, or, if Directors of Officers have not been
Required Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in it.817.155, F.S. [See below for required signature(s).]  Signature:  Tritle: Manager  Signature:  Tritle: Tritle:  Signature: Tritle:  Signature: Tritle:  Florida General Partnership or Limited Liability Partnership:  Signature of one General Partners.  Florida Limited Partnership or Limited Liability Limited Partnership:  Signature of a Member or Authorized Representative.  All others:  Signature of an authorized person.  Sees:  Certificate of Conversion: \$35.00	Printed Name: Brian Alderman Title	- Chairman
stated in this document are true. Any false information constitutes a third degree felony as provided for in 1.817.155, F.S. [See below for required signature(s).]  Signature:  Printed Name:  Printed N	Timed Name.	, Ortalina II
stated in this document are true. Any false information constitutes a third degree felony as provided for in 1.817.155, F.S. [See below for required signature(s).]  Signature:  Printed Name:  Printed N	Required Signature(s) on behalf of Other Busine	ess Entity: Individual(s) signing affirm(s) that the facts
Signature:  Printed Name:  Printed N	stated in this document are true. Any false inform	lation constitutes a third degree felony as provided for in
Signature:	s.817.155, F.S. [See below for required signature(s	).]
Signature:		-
Signature:	Signature:	
Signature:	Printed Name: Frian Alderman	Title: Manager
Signature:   Title:   Signature:   Signatu		
Signature:   Title:   Signature:   Signatu	Signature:	Tiale
Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Title: Signature: Title: Signature: Title: Signature: Febrida General Partnership or Limited Liability Partnership: Signature of one General Partner. Signatures of ALL General Partners.  If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.  If Florida Limited Liability Company: Signature of a Member or Authorized Representative.  Signature of an authorized person.  Sees: Certificate of Conversion: \$35.00	Frinted Name.	1 tue:
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Signature:  Printed Name:  Title:    Florida General Partnership or Limited Liability Partnership:   Signature of one General Partner.    Florida Limited Partnership or Limited Liability Limited Partnership:   Signatures of ALL General Partners.    Florida Limited Liability Company:   Signature of a Member or Authorized Representative.    Signature of an authorized person.   Signature of an authorized person.   Signature of an authorized person.   Signature of Conversion:   \$35.00	Signature:	
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Florida Limited Liability Company:  Signature of a Member or Authorized Representative.  All others:  Signature of an authorized person.  Sees:  Certificate of Conversion: \$35.00		F . 0
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Sees: Certificate of Conversion: \$35.00	organical of a Memoer of Authorized Representative	<b>c.</b>
Sees: Certificate of Conversion: \$35.00	All others:	
Certificate of Conversion: \$35.00		
Certificate of Conversion: \$35.00	- '	
Certificate of Conversion: \$35.00	Fees:	
Fees for Florida Articles of Incorporation: \$70.00		\$35.00
	Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy: \$8.75 (Optional)	• • • • • • • • • • • • • • • • • • •	
Certificate of Status: \$8.75 (Optional)		• • •

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I	NAME	T I I	
The name of the co	orporation shall be: Alderma	ın Lechnologi	es, inc.
ARTICLE II	PRINCIPAL OFFICE		
2760 14	Principal <u>street</u> address th Ave SE	Mailing ad	dress, if different is:
Naples, Fi			
	2011)	<del>-</del>	
-			<u></u>
ARTICLE III			
The purpose for w	hich the corporation is organized is:		
CON	duct busi	iness in	Florida
The number of sha			
4 DATA			
ARTICLE V	INITIAL OFFICERS AND/OR DIR itle: Brian Alderman, Chairman		
Address:	2760 14th Ave, SE	Name and Title: Address:	· · · · · · · · · · · · · · · · · · ·
Addiess.	Naples, FL 34117	Address:	
	vidpos, 12 0171		· wh
			7 7 7
Name and Ti	tle: Kelly Alderman, Director	Name and Title:	
Address:	2760 14th Ave, SE.	Address:	<u> </u>
	Naples, FL 34117	<del></del>	
			NRY CO
Name and Ti	itle:	Name and Title:	Limitania Section 1
Address:		A 1.1	<del></del>
		Addiess.	
		Brian Alderman	
			) in the
	REGISTERED AGENT		
	rida street address (P.O. Box NOT accep	otable) of the registered agent is:	
Name: Address:	Brian Alderman 2760 14th Ave, SE.	<del></del>	
Address.	Naples, FL 34117		
	1149105, 13 0-117		
RTICLE VII	<u>INCORPORATOR</u>		
	Iress of the Incorporator is:		
Name:	Brian Alderman		
Address: 2760 14th Ave. SE.			
	Naples, FL 34117		
laving been name nis certificate, I an	ed as registered agent to accept service on the service of the appointments.	f process for the above stated corport nt as registered agent and agree to ac	ation at the place designated i t in this capacity
Bun	Mun	12/16/2010	
Requi	red Signature/Registered Agent	Date	
submit this docu	ment and affirm that the facts stated her epartment of State constitutes a third degr	rein are true. I am aware that any fa ree felony as provided for in s.817.155	alse information submitted in a i, F.S.
1/2	111-	12/16/2010	
Requir	ed Signature/Incorporator	Date	<u> </u>