712000052666

(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



900236032529

06/08/12--01013--002 **78.75

TALLAHASSEE PARIS

L Shivers MM 11 201

COVER LETTER

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

SUBJECT: Professional Pool Maintenance of Florida Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:			
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED			
FROM: Norman E. Leonard, II Name	(Printed or typed)			
749 NW White Wing Dove Drive				
Greenville, FL 32331	State & Zip			
(954) 592-9530 Daytime Te	3 3 H,			
N/A E-mail address: (to be used	l for future annual report notification)			

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

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

ARTICLE I The name of the	NAME corporation shall be:	Maintenance of Florida I	nc.
ARTICLE II			
	Principal <u>street</u> address 749 NW White Wing Dove Drive Greenville, FL 32331		address, if different is:
	PURPOSE which the corporation is organized is: in all acts legal in the State of Flori	da, for profit.	
ARTICLE IV The number of sh	SHARES nares of stock is:100 shares common		
ARTICLE V	INITIAL OFFICERS AND/OR DIREC	CTORS	
Name and Address:	Title: Norman E Leonard, II 749 NW White Wing Dove Drive Greenville, FL 32331 President/Secy-Treasurer	e Address: <u>749 N</u> Greer	rt V. Taylor W White Wing Dove Drive wille, FL 32331 President
Name and Address:	Title:	Address:	
Name and Address:	Title:	Address:	
The <u>name</u> and F	REGISTERED AGENT lorida street address (P.O. Box NOT acceptate		2012 TĂĹĹ
Name: Address:	Norman E Leonard, II 749 NW White Wing Dove Dr Greenville, FL 32331	ive	AHASS
ARTICLE VII	INCORPORATOR		m- co
	idress of the Incorporator is:		TO 17 i
Name: Address:	Norman E Leonard, II 749 NW White Wing Dove Driv Greenville, FL 32331	ve	
	ned as registered agent to accept service of p am familiar with and accept the appointment o		
More	mal C. Translet		June 6, 2012
	Required Signature/Registered Agen		Date Date
	cument and affirm that the facts stated herei Department of State constitutes a third degree	n are true. I am aware that the	
Norm	on C. Kessed F	-	June 6, 2012
	Required Signature/Incorporator		Date