

PI20000054667

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

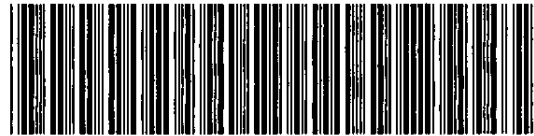
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W12000025125



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12 JUN 15 PM 4:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MD 6/18



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 7, 2012

RACHEL KEITH  
3178 CRESTWOOD CIRCLE  
APT. H  
ST. CLOUD, FL 34769

SUBJECT: TRANQUILITY POOL & SPA, INC.  
Ref. Number: W12000025125

We have received your document for TRANQUILITY POOL & SPA, INC. and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of 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.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 812A00013629

## COVER LETTER

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

SUBJECT: Tranquility Pool & Spa, 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: Rachel Keith  
Name (Printed or typed)

3178 Crestwood Cir Apt. H  
Address

St. Cloud FL 347169  
City, State & Zip

321-960-4351  
Daytime Telephone number

rareea78@yahoo.com  
E-mail address (to be used for future annual report notification)

**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:

Tranquility Pool and Spa, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

3178 Crestwood Cir.  
Apt H  
St. Cloud, FL 34769

Mailing address, if different is:

107 Stonefield Ct.  
Warner Robins, GA 31093

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

business

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TALLAHASSEE, FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is:

1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:

Rachel Keith (P)

Address:

107 Stonefield Ct.  
Warner Robins, GA 31093

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

**ARTICLE VI REGISTERED AGENT**

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

Name:

Rachel Keith

Address:

3178 Crestwood Cir.  
Apt H  
St. Cloud, FL 34769

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name:

Rachel Keith

Address:

107 Stonefield Ct.  
Warner Robins, GA 31093

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

Rachel Keith

Required Signature/Registered Agent

6-12-12

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Rachel Keith

Required Signature/Incorporator

6-12-12

Date