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Special Instructions to Filing Officer:			
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T. Bureh JUL - 2 2012

COVER LETTER

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

SUBJECT: The Pool Company, USA Inc.				
(PROPOSÉD CORPORA	TE NAME – <u>MUST INC</u>	LÜDE SUFFIX)		
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED		
	(Printed or typed)			
4041 Kaiser Avenue	Address			
Saint Cloud, Florida, 34	772 State & Zip			
4074485371 Daytime To	elephone number			
thepoolcompany@aol.co E-mail address: (to be used	m I for future annual report	notification)		

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



12 JUL -2 AM 10: WA

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 19, 2012

TANYA MICHELE JOHNSON 4041 KAISER AVE SAINT CLOUD, FL 34772

SUBJECT: THE POOL COMPANY INC.

Ref. Number: W12000033103

We have received your document for THE POOL COMPANY INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please submit only one set of articles.

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.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 412A00017011

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

The name of the corp				
ARTICLE II PRINCIPAL OFFICE Principal street address		Mailina a	Mailing address, if different is:	
40	41 Kaiser Avenue	wianing a	duicss, it difficient is.	
	int Cloud,Florida,34772			
				
ARTICLE III P	URPOSE		~ ·	
	ch the corporation is organized is:			
For Profit			半常 と	
			25 - 2 FIL	
			and the second s	
ARTICLE IV S	BHARES			
The number of shares	s of stock is:100		हिला है	
ARTICLE V I	NITIAL OFFICERS AND/OR DIRECT	ORS	•	
	:Miss Tanya Michele Johnson			
Address:	4041 Kaiser Avenue	Address:		
	Saint Cloud, Florida, 34772			
Name and Title	e:	Name and Title		
Address:				
31 1771				
Address:	e:	Name and Title:		
ARTICLE VI R	EGISTERED AGENT			
	la street address (P.O. Box NOT acceptable) of the registered agent is:		
Name:	Tanya Michele Johnson			
Address:	4041 Kaiser Avenue			
	Saint Cloud, Florida, 34772			
ARTICLE VII II	NCORPORATOR			
	ess of the Incorporator is:			
Name:	Tanya Michele Johnson			
Address:	4041 Kaiser Avenue			
	Saint Cloud, Florida, 34772			
Having been named	as registered agent to accept service of pro-	cass for the above stated corne	ration at the place designated in	
his certificate, I am f	familiar with and accept the appointment as	registered agent and agree to a	ct in this canacity	
0	0	and the second s	_	
	TO MARK		6-25-12	
10	Required Signature/Registered Agent	 	Date	
submit this docume	ent and affirm that the facts stated herein	are true. I am aware that the	false information submitted in a	
ocument to the Depo	artment of State constitutes a third degree fe	ony as provided for in s.817.15	,	
. 1	10000		6-25-12	
	Required Signature/Incorporator		1)-20-10	