P12000076411

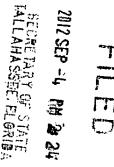
(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Only State 2 pr Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Consist leaders to Filip Office
Special Instructions to Filing Officer:
A 0 7 15 15
A. LUNT
SEP - 7 2012
27, • 7015

Office Use Only



200239146232

09/04/12--01022--013 **105.00



COVER LETTER

TO: Registration Section

Division of C	Corporations				
SURJECT: POOL	EXCELLENCE INC				
		esulting Florida Profit Cor	poration		
The enclosed Certific "Other Business Ent.	cate of Conversion, Ar ity" into a "Florida Pro	ticles of Incorporation of the Corporation of the C	, and fees are submitt cordance with s. 607.	ed to co	onvert ar
Please return all corr	espondence concernin	g this matter to:			
NICKOLAS J. SPF	RADLIN			ser f	
	Contact Person				2012
THE LAW OFFIC	ES OF NICK SPR	ADLIN, PLLC		とは	1012 SEP -4
	Firm/Company			55 55 55 55 55 55 55 55 55 55 55 55 55	ŧ.
18952 N DALE MA	BRY HWY STE 102			E S	翻
	Address				#2 #
LUTZ, FLORIDA 3	33548			≶"	· ÆT
C	City, State and Zip Code				
junier00@gmail.c	om be used for future annual r	eport notification)			
For further informati	on concerning this ma	tter, please call:			
NICKOLAS J. SPRA	ADLIN	at (813) 435	-3176		
Name of Con		—···· \	me Telephone Number		
Enclosed is a check f	or the following amou	nt:			
■ \$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		
STREET ADDRESS Registration Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	ions er Circle	MAILING A Registration S Division of C P. O. Box 633 Tallahassee, 1	Section corporations 27		

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:

POOL EXCELLENCE LLC		
Enter Name of Other Business Entity	2017	
2. The "Other Business Entity" is a FLORIDA LLC	2012 SEP	
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)	14 000	
first organized, formed or incorporated under the laws of FLORIDA	殿	
(Enter state, or if a non-U.S. entity, the name of the country)	2	
on 06/08/2009		
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 twhich it is now organized, formed or incorporated: 4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation 		
POOL EXCELLENCE INC		
Enter Name of Florida Profit Corporation		
5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this docu filed by the Florida Department of State; AND 2) must be the same as the effective date 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 currently organized, formed or incorporated.

Signed this 10th day of AUGUST	. 20_12		
Signed this 10 TV day of 10 TO 30 1	, 20_122		
Required Signature for Florida Profit Corpora Individual signing affirms that the facts stated in a third degree felony as provided for in s.817.155	this document are true. Any false informa	ition cons	titutes
Signature of Chairman, Vice Chairman, Director, selected, an Incorporator:	WOC:	not been	
Printed Name: JUNIER HECHEVARRIA Title	PRÉSIDENT		
Required Signature(s) on behalf of Other Busine stated in this document are true. Any false inform s.817.155, F.S. [See below for required signature(s)	ation constitutes a third degree felony as		
Signature: 100 GOORG	Tid., poroprist		
Printed Name; John Heorie Varka	Title: PRESIDENT		
Signature:Printed Name:		7 L 2	201
Printed Name:	Title:	25 188	25
Signature		किए मिर्ने अन्य सम्ब	τß
Signature:Printed Name:	Title:	ASSE ASSE	1 .
			ST .
Signature: Printed Name:	Title	四四	
i inico ivanio.	Title.	OF STATE	F 2
Signature:		छ्या रम	ئ
Printed Name:	Title:	-	
Signature:			
Printed Name:	Title:		
If Florida General Partnership or Limited Liabili Signature of one General Partner. If Florida Limited Partnership or Limited Liabili	ty Partnership:		
Signatures of ALL General Partners.	ty Launceu Parcheromp.	,	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative	: • · ·	٠	
All others: Signature of an authorized person.		•	
· · · · · · · · · · · · · · · · · · · ·			
Certificate of Conversion:	\$35.00		
Fees for Florida Articles of Incorporation:	\$70.00		
Certified Copy:	\$8.75 (Optional)		
Certificate of Status:	\$8.75 (Optional)		

Page 2 of 2

TILED

ARTICLES OF INCORPORATION

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

ARTICLE II PRINCIPAL OFFICE Principal street address 7321 W LAKE DR			Mailing address, if different is:			
WEST PALM	BEACH FL 33406 US		WEST PALM BEACH FL 3340	6 US		
ARTICLE III P						
	ch the corporation is organized is:			だい 豊		
	Awfu Busiaess.			F 20		
THY HAD ALL C.	100319 (33)			2012 SEP -4 SEUNE BARY SALLAHASSI		
ARTICLE IV S	Hares					
The number of shares	of stock is: 1000 COMMON STOCK AT 10 CENTS P	AR VALUE		g. 1		
			•	63 8		
	VITIAL OFFICERS AND/OR DIREC		and male	TATE ONLE		
Address:	JUNIER HECHEVARRIA D.P.B.T. 7321 W LAKE DR	Name	e and Title:	i*		
Addiess.	1001710744	Auu	,			
	WEST PALM BEACH FL 33406 US					
Name and Title		Name	a and Title:			
Address:	·	Addr	ess.			
				,		
Name and Title		Name	e and Title:			
Address:		Addm	css:			
						
•						
	EGISTERED AGENT	1 > 00				
Name and Florid	a street address (P.O. Box NOT acceptab		istered agent is:			
Address:	JUNIER HECHEVARRIA 7321 W LAKE DR					
riumpaa,	WEST PALM BEACH FL 33406 US					
<u>ARTICLE VII IN</u>						
	ss of the Incorporator is:					
Name:	JUNIER HECHEVARRIA					
Address:	7321 W LAKE DR WEST PALM BEACH FL 33406 US		•			
	772011700000000000000000000000000000000			•		
Having been named a	is registered agent to accept service of pr	ocess for the	above stated corporation	at the place designated in		
	tmilier with and accept the appointment a					
11	(1d 10 mordin)		notic lan-			
	him makes		UDITIONAL.	と		
Required	Signature/Registered Agent		Date			

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

Required Signature/Incorporator

08/16/2012