

P13000009578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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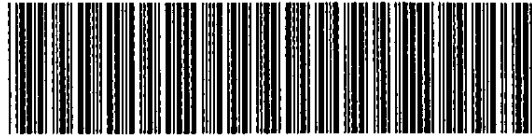
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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13 JAN 28 PM 12:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 01/30/13

COVER LETTER

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

SUBJECT: Pools 2 Perfection, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: David Vera

Name (Printed or typed)

2112 SW 82nd Ave

Address

Davie, FL 33324

City, State & Zip

954-336-8226

Daytime Telephone number

pools2perfection@gmail.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:

Pools 2 Perfection, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2112 SW 82nd Ave

Davie, FL 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

swimming pool service

ARTICLE IV SHARES

The number of shares of stock is:

2,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

David Vera, Director 1

Name and Title:

Tricia Vera, Director 2

Address

**2112 SW 82nd Ave
Davie, FL 33324**

Address:

**2112 SW 82nd Ave
Davie, FL 33324**

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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TALLAHASSEE, FLORIDA

(cont.)

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: David Vera

Address: 2112 SW 82nd Ave

Davie, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: David Vera

Address: 2112 SW 82nd Ave

Davie, FL 33324

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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



David Vera

Required Signature/Registered Agent

01/23/2013

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.



David Vera

Required Signature/Incorporator

01/23/2013

Date