

PA000011758

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(City/State/Zip/Phone #)

☐ PICK-UP

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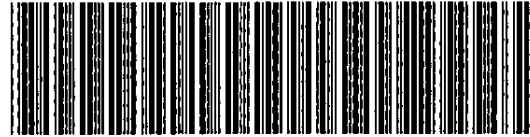
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: POOL PROGRAMMING MANAGEMENT INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: POOL PROGRAMMING MANAGEMENT INC.
Name (Printed or typed)

674 MOSSY BRANCH COURT
Address

LONGWOOD, FL 32799
City, State & Zip

407-862-2207
Daytime Telephone number

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

ARTICLES OF INCORPORATION

ARTICLE 1 NAME

THE NAME OF THE CORPORATION SHALL BE
POOL PROGRAMMING MANAGEMENT ,INC.

THE PRINCIPLE PLACE OF BUSINESS OF THIS CORPORATION IS
674 MOSSY BRANCH COURT, LONGWOOD, FL., 32779

ARTICLE 11 NATURE OF BUSINESS

THE CORPORATION MAY ENGAGE IN OR TRANSACT ANY AND ALL
LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE
UNITED STATES, THE STATE OF FLORIDA, OR ANY OTHER
STATE, COUNTRY, TERRITORY OR NATION.

ARTICLE 111 CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS PAR VALUE
THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT
ANY ONE TIME IS:

500 SHARES AT \$ 1.00 EACH.

ARTICLE IV TERM OF EXISTENCE

THE CORPORATION IS TO EXIST PERPETUALLY.

ARTICLE V OFFICERS DIRECTORS

THE NAME (S) AND STREET ADDRESS(ES) OF THE INITIAL OFFICER(S) AND
DIRECTOR(S), IF ANY, WHO SHALL HOLD OFFICE THE FIRST YEAR OF THE
CORPORATION'S EXISTENCE OR UNTIL THEIR SUCCESSOR(S)
IS(ARE) ELECTED, IS(ARE):

.. JOHN CLAY PARNELL,
674 MOSSY BRANCH COURT,
LONGWOOD, FL., 32779

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ARTICLE VI INCORPORATORS

THE NAME (S) AND STREET ADDRESS(ES) OF THE INCORPORATOR(S) TO
THIS ARTICLES OF INCORPORATION IS(ARE)

JOHN CLAY PARNELL
674 MOSSY BRANCH COURT
LONGWOOD,FLORIDA,39

IN WITNESS WHEREOF, THE
UNDERSIGNED INCORPORATOR(S) HAS (HAVE)EXECUTED THESE ARTICLES
OF INCORPORATION THIS 15TH DAY OF JANUARY 2014.
POOL PROGRAMMING MANAGEMENT INC.

SIGNATURE(S) OF INCORPORATOR(S)

John Clay Parnell

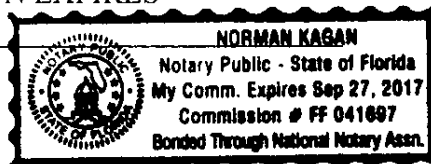
STATE OF FLORIDA,

COUNTY SEMINOLE

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED AND SWORN TO
BEFORE ME THIS 15TH DAY OF JANUARY 2014. *Norman Kagan*

NOTARY PUBLIC

MY COMMISSION EXPIRES



CERTIFICATE DESIGNATING REGISTERED AGENT/REGISTERED
OFFICE.

PURSUANT TO THE PROVISIONS OF SECTION 607.325, FLORIDA
STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE
LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT
IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

1.THE NAME OF THE CORPORATION IS:
POOL PROGRAMMING MANAGEMENT INC.

2.THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

JOHN CLAY PARNELL
674 MOSSY BRANCH COURT
LONGWOOD,FL.,32779

SIGNATURE 
CORPORATE OFFICER

TITLE__PRESIDENT_____

DATE_JANUARY 15TH,2014

HAVING BEEN NAMED TO ACCEPTS SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE,
I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO
COMPLY WITH THE PROVISIONS OF ALL; STATUTES RELATIVE TO THE
PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT
THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE 
REGISTERED AGENT

DATE_JANUARY 15TH,2014

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TALLAHASSEE FLORIDA