

P14 000041609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

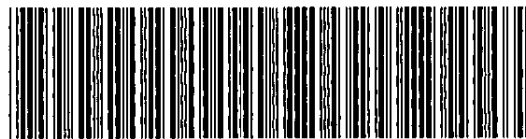
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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05/12/14--01014--022 **78.75

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2014 MAY 12 PM 1:38
101014000041609
SUFFICIENCY OF FILING

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAY 12 PM 2:16

80025
5/12/14

COVER LETTER

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

SUBJECT: Florida Native Pools 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: Thomas McGee

Name (Printed or typed)

980 Oleander Dr

Address

Key Largo FL 33037

City, State & Zip

239-777 0257

Daytime Telephone number

mcgee_flo2@comcast.net

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: Florida NATIVE POOLS Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

980 OLEander DR
Key Largo FLA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: POOL Construction

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DIVISION OF CORPORATIONS
14 MAY 12 PM 2:17

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Thomas McGee (P)

Name and Title: _____

Address 980 OLEander

Address: _____

DR Key Largo
FLA 33037

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(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: Thomas McKee
Address: 980 Alexander Dr
Key Largo FL 33037

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Thomas McKee
Address: 980 Alexander Dr
Key Largo FL 33037

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

Thomas McKee
Required Signature/Registered Agent

5/12/14
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.

Thomas McKee
Required Signature/Incorporator

5/12/14
Date

Name Affidavit

I Thomas Mc Gee have no intention
of Reinstating the Subject Corp. "Florida Native Pds, Inc."
doc. # P12000018842.

Therefore I am releasing the name for use to the
new entity.

Signed 5/12/14

Thomas Mc Gee