

P/4000099330

(Requestor's Name)

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(City/State/Zip/Phone #)

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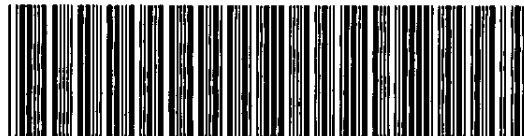
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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14 DEC 11 AM 11:41
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W14-69608

12/12/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 18, 2014

MICHAEL VACHA
1614 S 10TH ST.
HAINES CITY, FL 33844

SUBJECT: FLORIDA POOL SERVICES INC
Ref. Number: W14000069608

RECEIVED
14 DEC 11 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for FLORIDA POOL SERVICES INC and your check(s) totaling \$78.75. 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.

The document number of the name conflict is P01000105767 (FLORIDA POOL SERVICE, INC.).

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 114A00024509

COVER LETTER

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

SUBJECT: **Florida Pool Services and Supplies 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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: **Michael Vacha**
Name (Printed or typed)
1614 S 10th St
Address
Haines City, FL 33844
City, State & Zip
407-692-1553
Daytime Telephone number
VACHA6@JUNO.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: Florida Pool Services and Supplies Inc

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

1614 S 10th St

Haines City, Fl. 33844

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: construction and maintenance
of swimming pools and all other legal business activities.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Vacha, President

Address: 1614 S 10TH ST
Haines City, Fl 33844

Name and Title: Sheryl Vacha, Secretary/Treasurer

Address: 1614 S 10TH ST
Haines City, Fl 33844

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

(conti.)

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: Michael Vacha
Address: 1614 S 10th St
Haines City, Fl 33844

ARTICLE VII EFFECTIVE DATE *The effective date for this corporation shall be 1/1/2015.*

ARTICLE VIII INCORPORATOR

The name and address of the Incorporator is:

Name: RLE Tax, Inc (Jenna Garrett)
Address: 3111 SW Calm Ridge Rd
Bentonville, Ar 72712

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

Michael Vacha 12/8/14
Required Signature/Registered Agent 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.

Jenna Garrett 11/12/14
Required Signature/Incorporator Date

FILED
14 DEC 11 AM 11:41
TALLAHASSEE, FL 32304