## P16000046533

(Requestor's Name)					
(Address)					
· .					
(A) (a)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
<u> </u>					

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SECRETARY OF STATE
ALLAHASSEE FLORIDA

## **COVER LETTER**

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

SUBJECT:

Pure Water Source, Inc.

<del></del>	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	nald Peacher	(Printed and treed)	- Internal Control of the Control of		
436	8 Fanny Bass Lane	e (Printed or typed)			
	Address				
St. 0	Cloud, FL 34772				
<del></del>	City,	State & Zip			
(40)	7) 460-8394				
<del></del>	Daytime T	elephone number			
vics	chu1016@aol.com				
	E-mail address: (to be use	d for future annual report r	otification)		

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)

The name of the corpora			The second secon	
<u>ARTICLE II PRINC</u>	<u>CIPAL OFFICE</u> Principal <u>street</u> address	Mailing	Mailing address, if different is:	
4368 Fanny Bass Lane St. Cloud, FL 34772		P.O. Box 423248		
		Kissîmmee, FL 3	4742	
ARTICLE III PURPO The purpose for which t	DSE he corporation is organized is:	ional water filitration service	corporation.	
ARTICLE IV SHAR	stock is:		16 MAY 20 PH SECRETARY OF TALLAHASSEE F	
Name and Title	Donald Peacher, President	Name and Title:	LORID	
Address	4368 Fanny Bass Lane	Address:		
	St. Cloud, FL 34772		<del></del>	
Name and Title:		Name and Title:		
Address				
Name and Title:		Name and Title:		
Address		Address:		
Address				

Name a	nd Title:	Name and Title:	
Addres	s	Address:	
		•	
	REGISTERED AGENT   lorida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Donald Peacher	of the registered agent is.	
Address:	4368 Fanny Bass Lane	<del></del>	
	St. Cloud, FL 34772		
ARTICLE VII	<u>INCORPORATOR</u>		<b>≅</b>
The name and a	ddress of the Incorporator is:		SECRIPATION OF THE PROPERTY OF
Name:	Donald Peacher		HE Y COMMENT
Address:	4368 Fanny Bass Lane		SEE THE SEE TH
	St. Cloud, FL 34772	<del>_</del>	#: 22
Effective date, if (If an effective of days after the fine the Note: If the date	e inserted in this block does not meet the applicable	le statutory filing requirement	ess days prior or 90 business
the document's e	ffective date on the Department of State's records	s.	
this certificate, I	med as registered agent to accept service of proce am familiar with and accept the appointment as r	egistered agent and agree to	ration at the place designated in act in this capacity
OSW PEACHER PRES, DONALD WA		YUE PEACHER	May 11, 2016
	Required Signature/Registered Agent	•	Date
I submit this document to the	cument and affirm that the facts stated herein ar Department of State constitutes a third degree felo	e true. I am aware that the j ony as provided for in s.817.1	false information submitted in a 55, F.S.
OW BA	CHER PRES. DOWALD WAYNE	PEACHE	May 11, 2016
Requi	ired Signature/Incorporator		Date