

8/29/2018

Division of Corporations

**P18000074043**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : LICENSE EXAM SERVICES  
Account Number : I20120000042  
Phone : (941)706-2336  
Fax Number : (866)473-0571

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: c2ccompanies@gmail.com

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**SAFARI POOLS & SPAS OF THE TREASURE COAST, INC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 06      |
| Estimated Charge      | \$70.00 |

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SECRETARY OF STATE  
TALLAHASSEE, FL

2018 AUG 29 PM 3:00

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### COVER LETTER

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

SUBJECT: OASIS POOLS & SPAS OF THE TREASURE COAST, 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: JEFF GOMEZ

Name (Printed or typed)

665 4TH STREET

Address

VERO BEACH, FL 32962

City, State & Zip

772-473-2402

Daytime Telephone number

C2CCOMPANIES@GMAIL.COM

E-mail address: (to be used for future annual report notification)

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

H180002530823

**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: OASIS POOLS & SPAS OF THE TREASURE COAST, INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

665 4TH STREETVERO BEACH, FL 32962**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

SWIMMING POOL AND SPA CONSTRUCTION AND REPAIR**ARTICLE IV SHARES**100

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JEFF GOMEZ, PRES.Name and Title: BETTY GOMEZ, VICE PRES.Address 665 4TH STREETAddress: 665 4TH STREETVERO BEACH, FL 32962VERO BEACH, FL 32962Name and Title: CRAIG MCCOY, TREASURER

Name and Title: \_\_\_\_\_

Address 665 4TH STREET

Address: \_\_\_\_\_

VERO BEACH, FL 32962

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

2018 AUG 29 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

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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: JEFF GOMEZ

Address: 665 4TH STREET

VERO BEACH, FL 32962

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JEFF GOMEZ

Address: 665 4TH STREET

VERO BEACH, FL 32962

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2018 AUG 29 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FL

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 8-23-18 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

\_\_\_\_\_  
Required Signature/Registered Agent

8-23-18  
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.*

\_\_\_\_\_  
Required Signature/Incorporator

8-23-18  
Date