P19000072778

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(Business Entity Name)

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COVER LETTER

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

SUBJECT: ABove & Beyond Pool Services 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: Michael Caccavella
Name (Printed or typed)

9850 Via Amati Dr.
Address

Lake Worth Fl. 33467
City, State & Zip

561-706-9626
Daytime Telephone number

papaduh2@Aol.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: ABode & Beyond Pool Services INC

ARTICLE II PRINCIPAL OFFICE
Principal street address:
9850 Via Amati Dr
Lake Worth
Fl. 33467

Mailing address, if different is:
SAME AS ABOVE

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: IS To engage in the Lawfull Activities of FLA For The Purpose of Running A Company In The Pool Industry And Other Related Industies

ARTICLE IV SHARES
The number of shares of stock is: 100 @ $1 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Caccavello P/D
Address: 9850 Via Amati Dr.
Lake Worth
Fl 33467

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

2019 SEP 12 PM 12:31

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 A. Caccavella

Address: 9850 Via Amati Dr.
Lake Worth Fl. 33467

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Michael A. Caccavella

Address: 9850 Via Amati Dr
Lake Worth Fl. 33467

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (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

Michael A Caccavella — 9/3/19

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.

Michael A Caccavella — 9/3/19

Required Signature/Incorporator — Date

Above & Beyond Pro Services Inc # P17000094431

Due To Fraud : Corp including TAX Returns & other ID Such as CC, ECT. This Corp will NOT Engage and conduct ANY Business or Activities under Document # P17000094431. Ever again! So we can Re-establish a new Corp under New Doc. #

Michael A. Caccavello

Printed Name of the Person Filing

[signature]

Signature of the Person Filing