

P23000056843

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : JTAX CORP
Account Number : 120200000009
Phone : (954)544-1000
Fax Number : (954)678-4500

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

Email Address: HELLO@JTAXCORP.COM

FLORIDA PROFIT/NON PROFIT CORPORATION
POOL LEAK DETECTIVE CORP

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

RECEIVED

2023 JUL 32 PM 4:23

REGISTRATION
DIVISION

STATE
TALLAHASSEE, FL

2023 AUG -1 AM 9:22

FILED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: POOL LEAK DETECTIVE CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address
264 PRESCOTT MMailing address, if different is:
SAMEDEERFIELD BEACH, FL, 33442**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: FILIPPE OCTAVIO MISSIO DE ALMEIDA - PRESIDENT Name and Title: _____Address 264 PRESCOTT M Address: _____
DEERFIELD BEACH, FL, 33442

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FL

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: JTAX CORP
 Address: 23123 STATE RD 7 STE 315
BOCA RATON, FL 33428

ARTICLE VII INCORPORATOR

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

Name: JTAX CORP
 Address: 23123 STATE RD 7 STE 315
BOCA RATON, FL 33428

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

 Required Signature/Registered Agent

08/01/2023

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

08/01/2023

Date

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 SEC. OF STATE
 TALLAHASSEE, FL