

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000143592 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019 Phone : (305)552-5973

: (305)675-5944

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

Email Address:_

FLORIDA PROFIT/NON PROFIT CORPORATION J&A POOL SERVICE INC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$78.75 |

Electronic Filing Menu

Corporate Filing Menu

Help





ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

| JLA Pool Service INC | |
|---|--|
| ARTICLE II PRINCIPAL OFFICE: | |
| The principal street address and mailing address is: | |
| 10201 SW 13 ST | |
| Mami F1, 3317 F. | |
| | |
| ARTICLE III SHARES: The number of shares of stock is: O O | |
| ARTICLE IV INITIAL DIRECTORS AND/OR OFFICEIS: | |
| Alberto Blanco Valido. (P) | |
| 26 Z | |
| | |
| SS T | |
| | |
| | |
| 07 | |
| ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: | |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: Alberto Blanco Glido | |
| 10201 SW 135 | |
| Miani, F1, 33174 | |
| ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: | |
| HLberto Blanco Valido | |
| 10201 SW 13 ST | |
| Miani, F/, 33174. | |
| | |

Required Signatures:

3052201440

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

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.

Incorporator

Liste