P950000 70920

LAZARUS CORPORATE INDUSTRIES, INC.

(Requestor's Name)

890 S.W. 87 AVENUE, SUITE: 16

(Address)

MIAMI, FLORIDA 33174 (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

(904)385-6715

200001584752 -03/14/95--01021--080

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

Other

CR2E031(10/92)

| | 1. SUMM | ER POOL CI-IC | EMICALS INC. | |
|---|-------------------|--------------------------------|-------------------------|-------------|
| | | ition Name) | (Document #) | _ |
| | • | ation Nante) | (Document #) | _ |
| | 3. (Corpora | ition Name) | (Document #) | _ |
| | | ntion Name) | (Document #) | |
| | Walk in 💹 | Pick up time 2000 | Certified Copy | 7 |
| | Mail out | Will wait Photocopy | Certificate of Status | ر ا ا |
| | NEW FILINGS | AMENDMENTS | | |
| X | Profit | Amendment | | |
| | NonProfit | Resignation of R.A., Offic | per/Director | |
| | Limited Liability | Change of Registered Age | ent | |
| | Domestication | Dissolution/Withdrawal | | |
| | Other | Merger | | |
| r | | | | |
| | OTHER FILINGS | REGISTRATION/ QUALIFICATION | | |
| | Annual Report | Foreign | | |
| | Fictitious Name | | | |
| | Name Reservation | Limited Partnership | | |
| | | Reinstatement | | |
| | | Trademark | Examiner's Initials | 7 |
| | | 1 100 | Examiner's initials C | . II |

ARTICLES OF INCORPORATION

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STORESTAND STATE
THOUSAND CONTRATIONS
95 SEP 14 PM 3: 10

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: Summer Pools Chemical SINC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8817 SW 129 TERR MIAMI FL, 33176

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: $100 + 5hAr2-\xi \le$

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOSE (MUNIZ 8817 SW 129 TERR MIAMITL 33176

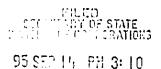
ARTICLE V INCORPORATOR(S)

| The name(s) | name(s) and street address(es) of the incorporator(s) to these Articles of Incorpora | | | | |
|--------------|--|--|--|--|--|
| ion is(are): | Jose C Munrz (President) | | | | |
| | MIAMI FL. 33176 | | | | |
| | 5817 SW 125 TIRR | | | | |

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE



Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

| 1, | The name of the corporation is: Summer Pools Chemicals Inc. |
|----|---|
| 2. | The name and address of the registered agent and office is: |
| • | (NAME) |
| | 8817 SW 129 TERRACE |
| | (P.O. BOX NOT ACCEPTABLE) |
| | MIAMI FL. 33176 |
| | (CITY/STATE/ZIP) |

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE