

# P960000007293

## TRANSMITTAL LETTER

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

300001693803  
-01/19/95--01110--008  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: TIM'S POOL CARE, INC  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☒ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM: TI B. HENDREN  
(Printed or typed)

1303 HOMESTEAD ROAD  
Address (ACRES)

LEHIGH ACRES, FL 33936  
City, State & Zip

941-369-4855  
Daytime Telephone number

Tim Hendren GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT RA address  
DATE 1-24-96  
DOOR ENCL OK

JAN 24 1995

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

## ARTICLES OF INCORPORATION

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JAN 19 AM 10:37

*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:

TIM'S POOL CARE, INC.

### ARTICLE II PRINCIPAL OFFICE

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

1303 HOMESTEAD ROAD  
LEHIGH ACRES, FL  
33936

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 SHARES

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

TIMOTHY B. HENDREN  
1303 HOMESTEAD ROAD  
LEHIGH ACRES, FL  
33936

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

TIMOTHY B. HENDREN, PRES  
5746 INVERNESS CIR  
N. FT. MYERS, FL  
33903

<sup>DIRECTOR</sup>  
TIMOTHY M. WOOD  
1391 TORREYA CIR  
N. FT. MYERS, FL

TRACEY A. HENDREN, SECY/TRES  
5746 INVERNESS CIR  
N. FT. MYERS, FL  
33903

33917  
941/731-0974

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

2<sup>ND</sup> day of JANUARY, 19 96.

Timothy B. Hendren  
Signature

Tracey A. Hendren  
Signature

Timothy M. Wood  
Signature

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
25 JAN 19 AM 10:37

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:

TIM'S POOL CARE, INC.

2. The name and address of the registered agent and office is:

TIMOTHY B. HENDREN  
(NAME)

1303 Homestead Road  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Lehigh Acres, FL 33936  
(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.*

Timothy B. Hendren  
(SIGNATURE)

1/11/96  
(DATE)

P96000007293

MARCH 4, 1997

FLORIDA DEPT OF STATE  
DIVISION OF CORPORATIONS  
P.O. Box 6327  
TALLAHASSEE, FL 32314

Re: DISOLVE Tim's Pool Care, INC.  
Document # P96000007293

FILED  
97 MAR 11 PM 4:14  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DEAR SIRs,

ENCLOSED PURSUANT TO SECTION 607.1403,  
FLORIDA STATUTES IS ARTICLES OF  
DISSOLUTION OF TIM'S POOL CARE, INC.  
THIS DISSOLUTION IS EFFECTIVE 3/1/97

500002113965--9  
-03/14/97--01076--006  
\*\*\*\*\*70.00 \*\*\*\*\*35.00

Timothy B. Hendren  
5746 Inverness Cir.  
N. Ft. Myers, FL 33903

SINCERELY

*Timothy B. Hendren*

P.O. Box 4817  
N Ft. Myers, FL 33918

TIMOTHY B. HENDREN  
PRESIDENT

RECEIVED  
97 MAR 11 PM 4:03  
DIVISION OF CORPORATIONS

3/13  
*[Signature]*  
Vol. 1255.

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FILED  
97 MAR 11 PM 4:14  
TALLAHASSEE  
SECRETARY OF STATE  
FLORIDA

FIRST: The name of the corporation is: TIM'S POOL CARE, INC.  
(DOCUMENT #P96000007293)

SECOND: The date dissolution was authorized: 3/1/97

THIRD: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by vote of the shareholders through voting groups.

[The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

"The number of votes cast for dissolution was sufficient for approval by TIMOTHY B. HENDREN + TRACEY A. HENDREN."  
(voting group)

Signed this 4 day of MARCH, 19 97

Signature Timothy B. Hendren  
(By the Chairman or Vice Chairman of the Board, President, or other officer)

TIMOTHY B. HENDREN  
(Typed or printed name)

President  
(Title)