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TRANSMITTAL LETTER

FILED

95 MAY 6 PM 1:51

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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

SUBJECT: AMERICAN POOLS OF ST. LUCIE, INC.
(Proposed corporate name - must include suffix)

800001810838
-05/07/96--01060--013
****122.50 ****122.50

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

FROM: AMERICAN POOLS OF ST LUCIE, INC.
Name (printed or typed)

831 S.W. McCoy Ave
Address

Port St Lucie, Fla. 34953
City, State & Zip

Daytime Telephone number

PH 5/13/96

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

ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

AMERICAN POOLS OF ST. LUCIE, INC.

ARTICLE II PRINCIPAL OFFICE

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

831 S.W. McCoy Ave
Port St Lucie, FL. 34953

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10,000.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ROBERT CSEAK
831 SW McCoy Ave
Port St Lucie, FL. 34953

ARTICLE V INCORPORATOR(S)

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

ROBERT CSEAK
831 S.W. McCoy Ave
Port St Lucie, FLA. 34953

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

_____ day of _____, 19____.

X Robert Cseak 5-2-96
Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

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MAY 6 2011 1:51
STATE
TALLAHASSEE, FLORIDA

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

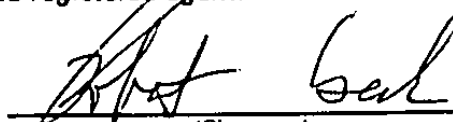
PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: AMERICAN POOLS OF ST.
LUCKIE, INC.

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

ROBERT CSEAK
(Name)
831 S.W. McCoy Ave
(P.O. Box not acceptable)
Port St Lucie, Fla. 34953
(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)

5-2-96
(Date)