

P96000053/30

TRANSMITTAL LETTER

FROM:

NAME OF CORPORATION, HEALTHY POOL & WATER, INC.
STREET ADDRESS OF THE CORPORATION, 6350 NALLE GRADE ROAD
CITY, NORTH FORT MYERS, STATE FLORIDA ZIP 33917

DEAR CORPORATIONS DIVISION:

ENCLOSURE
-06/21/96-01011-011
*****00.00 *****00.00

PLEASE FIND ENCLOSED:

1. AN ORIGINAL ARTICLES OF INCORPORATION AND ONE COPY FOR THE ABOVE NAMED CORPORATION.
2. A CERTIFICATE OF DESIGNATION OF REGISTERED OFFICE AND REGISTERED AGENT.
3. A CERTIFIED CHECK IN THE AMOUNT OF SEVENTY DOLLARS, (70.00) FOR FILING FEES.
4. A CERTIFIED COPY IS NOT REQUESTED.

PLEASE SEND RESPONSES OR RECEIPTS CONCERNING THIS FILING TO THE ABOVE ADDRESS.

6/19/1996
DATE

Regina Valli
SIGNATURE OF INCORPORATOR

REGINA VALLI
NAME OF INCORPORATOR

(941) 543-2652
TELEPHONE

FILED
96 JUN 20 AM 11:16
TALLAHASSEE, FLORIDA

Dmc
6/21/96

ARTICLES OF INCORPORATION
OF
HEALTHY POOL & WATER, INC.

FILED
JUN 20 2011 16

PURSUANT TO CHAPTER 607 OF THE FLORIDA BUSINESS CORPORATION ACT, THE UNDERSIGNED INCORPORATOR SUBMITS THESE ARTICLES OF INCORPORATION FOR THE PURPOSE OF FORMING A FOR-PROFIT CORPORATION.

ARTICLE 1. THE CORPORATION NAME IS:
HEALTHY POOL & WATER, INC.

ARTICLE 2. THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION IS:
REGINA VALLI 6350 NALLE GRADE RD. NORTH FORT MYERS, FL 33917

ARTICLE 3. THE CORPORATION IS AUTHORIZED TO ISSUE ONE CLASS OF STOCK, THAT BEING 10 SHARES OF NO PAR VALUE, COMMON STOCK, WITH IDENTICAL RIGHTS AND PRIVILEGES, THE TRANSFER OF WHICH IS RESTRICTED ACCORDING TO THE BYLAWS OF THE CORPORATION.

ARTICLE 4. NAME AND ADDRESS OF THE CORPORATION'S INITIAL REGISTERED AGENT IS:

REGINA VALLI, 6350 NALLE GRADE RD., NORTH FORT MYERS, FL 33917

ARTICLE 5. THE NAME AND STREET ADDRESS OF THE INCORPORATOR OF THIS CORPORATION IS:

REGINA VALLI, 6350 NALLE GRADE RD., NORTH FORT MYERS, FL 33917

ARTICLE 6. NO DIRECTOR SHALL BE HELD LIABLE TO THE CORPORATION OR ITS SHAREHOLDERS FOR MONETARY DAMAGES DUE TO A BREACH OF FIDUCIARY DUTY, UNLESS THE BREACH IS A RESULT OF SELF-DEALING, INTENTIONAL MISCONDUCT, OR ILLEGAL ACTIONS.

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES OF INCORPORATION ON THE DATE BELOW. THE UNDERSIGNED INCORPORATOR HEREBY DECLARES, UNDER PENALTY OF PERJURY, THAT THE STATEMENTS MADE IN THE FORGOING ARTICLES OF INCORPORATION ARE TRUE, AND THAT THE INCORPORATOR IS AT LEAST EIGHTEEN YEARS OF AGE.

6/19/1996
DATE

Regina Valli
SIGNATURE OF INCORPORATOR

REGINA VALLI
NAME OF INCORPORATOR

CERTIFICATE OF DESIGNATION
OF
REGISTERED OFFICE AND REGISTERED AGENT
FOR
HEALTHY POOL & WATER, INC.

FILED

96 JUN 20 AM 10

STATE OF FLORIDA

PURSUANT TO SECTION 607.0501 OF THE FLORIDA BUSINESS CORPORATION ACT, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE AND REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. THE NAME AND ADDRESS OF THE CORPORATION'S REGISTERED AGENT AND REGISTERED OFFICE IS:

REGINA VALLI
NAME

6350 NALLE GRADE ROAD
ADDRESS

NORTH FORT MYERS, FL 33917
CITY/STATE/ZIP

HAVING BEEN NAMED AS THE 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.

Regina Valli
SIGNATURE OF REGISTERED AGENT.

6/19/1996
DATE