

PG9600008880

TRANSMITTAL LETTER

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

ENCLOSURE
-10/29/95--01043--002
*****70.00 *****70.00

SUBJECT:

MITCHELL ALLISON POOLS, INC.

(Proposed corporate name - must include suffix)

RECEIVED
TALLAHASSEE, FLORIDA

56 OCT 28 PM 12:25

FILED

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:

MITCHELL ALLISON POOLS, INC.

(Name (Printed or typed))

c/o MITCHELL KLOMBERS

4667 ROTHSCHILD DRIVE

(Address)

CORAL SPRINGS, FL 33067

(City, State & Zip)

954-344-1288

(Daytime Telephone number)

PK
10/29/96

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

ARTICLES OF INCORPORATION

FILED

96 OCT 28 PM 12:26

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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

MITCHELL ALLISON POOL, INC.

ARTICLE II PRINCIPAL OFFICE

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

4667 ROTHSCHILD DRIVE
CORAL SPRINGS, FL 33067

ARTICLE III SHARES

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

100,000 SHARES.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MITCHELL KLUMBERS
4667 ROTHSCHILD DRIVE
CORAL SPRINGS, FL 33067

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):

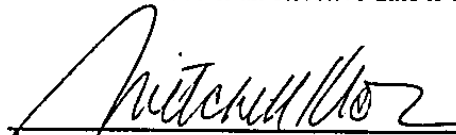
Mitchell KLOMBERS, PRESIDENT
4667 ROTHSCILD DRIVE
CORAL SPRINGS, FL 33067

Penny KLOMBERS, SECRETARY
4667 ROTHSCILD DRIVE
CORAL SPRINGS, FL 33067

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

⁹¹
27 day of SEPTEMBER, 19 96.

(An additional article must be added if an effective date is requested.)


Signature MITCHELL KLOMBERS


Signature PENNY KLOMBERS

Signature

Notarization is not required

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**

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:

Mitchell Allison Pools, Inc.

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

Mitchell Klombers
(NAME)

4667 Rothschild Drive
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Coral Springs, FL 33067
(CITY/STATE/ZIP)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 OCT 28 PM 12:26

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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.

Mitchell Klombers
MITCHELL KLOMBERS (SIGNATURE)

9/27/96
(DATE) 9/