

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

700002076777--1 -02/04/97--01072--016 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT:	ed Pools, In	name - must include su	ffix)	
Enclosed is an original				i a check
for : \$70.00 Filing Fee	X \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	97 FEB -3 SECRETALIANS
FROM:	Marvin E. Pittman  Name (printed or typed)			AIT
	1900 Hw	y 87 Ste I		): 57 IATE ORIDA
		Address		
	Navarre	, FL 32566		
	(	City, State & Zip		$\sim 1$
	(904) 9	39-3261		
	Daytir	ne Telephone number		

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

97 FEB -3 AM 10: 57

# ARTICLES OF INCORPORATION

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:

Certified Pools, Inc.

## ARTICLE II PRINCIPAL OFFICE

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

6025 Capital Dr Gulf Breeze, FL 32561

### ARTICLE III SHARES

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

One Thousand (1000)

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jay Wendel 6025 Capital Dr Gulf Breeze, FL 32561

. 16.4

# ARTICLE V INCORPORATOR(S)

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

Marvin E. Pittman 3650 Bob Tolbert Rd Navarre, FL 32566

# ARTICLE VI OFFICERS

The name(s) and street address(es) of the initial Officers of this corporation is(are):

NAME	ADDRESS					
Jay Wendel President	6025 Capital Dr Gulf Breeze, FL 32561					
Gayle Wendel Secretary-Treasurer The undersigned incorporator(s) bas/baya) or	6025 Capital Dr Gulf Breeze, FL 32561					
The undersigned incorporator(s) has(have) ex						
30 M day of JANNARY	19 97.					
Manin Sta	iture					
Signature						

Articles of Incorporation Filing Fee - \$35

Signature

# CERTIFICATE OF DESIGNATION OF

97 FEB -3 AH 10: 57

REGISTERED AGENT/REGISTERED OFFICE

TALLAHASSEE, FLORIDA

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.

The nam	ne of the corporation is: Certified Pools, Inc.					
. 1116 11811	tie Of the Corporation is					
2. The name and address of the registered agent and office is:						
Jay Wendel						
	(Name)					
	6025 Capital Dr					
	(P.O. Box not acceptable)					
	Gulf Breeze, FL 32561					
	(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.

/- 30- 97 (Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314