TRANSMITTAL LETTER

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Department of States District Corpositions P. O. By 6327 Tallahusee, J. L. 33. 4	3/

bject: <u>Na+i</u>	Proposed corp	orate name - must include suff	lx)
osed is an original at \$70.00 Filing Fee	\$78.75 Filing Fee	U\$122.50 Filing Fee	check for: \$131.25 Filing Fee,
	& Certificate	& Certified Copy	Certified Copy & Certificate

FROM: 1000	as M= 6ee	
5180	Name (Printed or typed) 33rd (4 5.W.	6000021236967 -03/25/9701062006 ******78.75 ******78.75
3180_	Address	
_Nap	les, Fl. 34116 City, State & Zip	97 HAR 25 SELVETARESSEE
NOTE: Plea	se provide the original and one co	Py of the articles.

ARTICLES OF INCORPORATION

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:

Native Sun Pools, Inc.

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ARTICLE II PRINCIPAL OFFICE

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

5180 23rd (t 5.w).

Naples, Fl. 34116

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Thomas ME Gee 2274 Hidden Lake Dr. #Le Naples, Fl. 34112

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):

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

18th day of <u>Harch</u>, 19 97.

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

Thomas NE Gre	
	Signature
abbeit ne Cer	
- 100	Signature
	•
	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:	Native Sun Ponts. Inc.
2. The name and address of the reg	istered agent and office is:
Thoma	s Mª bec (NAME)
2274	Hiolden Lake Dr. #6 Box or Mail Drop Box NOT ACCEPTABLE)
Napl	と3, f 34 1 2 (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.

Thomas We fale 3-18-92. 25 Thomas We fale (SIGNATURE) (DATE) FISTALE 8: 38

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