XXX287331

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

SUBJECT: "GUS" POO SURVICES & RUPAIRS
(Proposed corporate name - must include suffix)

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

15855 NO PH WOY. Miam? Building 247 E. Address

305) 333-1971- Fox (305) 558-2333
Daytime Telephone number

Gustavo

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

ne 10/9/97

FILED

ARTICLES OF INCORPORATION

97 OCT -9 PM 2: 14

SECKETAGE OF STATE The undersigned incorporator, for the purpose of forming a corporation under the Florida ALL AHASSEE, FLORIDA Business Corporation Act, hereby adopts the following Articles of Incorporation.

The name of the corporation shall be: "GUS" POOL SERVICES & REPAIRS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1.0-Box 414252

Hidwi Buch FIA 33141

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100/0

Shares 'NoN' PUL VALVE'

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: GUSTAVO DE YESUS SURE ?

15855 Lake Way North, Bldg. 247E Miami Lakes, Fl. 33014

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Gustavo de Jesus

158**1**5 Lake Way North, Bldg. 247E Miami Lakes, Fl. 33014

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

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

Signiture/Registerell Agent

Date

october 06/9: