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98 JAN 23 PM 12: 07 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

800002410168--7 -01/23/98--01048--002 ****131.25 ****131.25

SUBJECT: McWair Pools, Inc. (Proposed corporate name - must include suffix)	_
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Enclosed is an original an	nd one(1) copy of the article	s of incorporation and a c	check for :	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
•		ADDITIONAL CO	PY REQUIRED	
FROM: John Michael McWair Name (Printed or typed)				
5962 Ithaca Circle West				
<u>)</u>	ake Worth F	Port da 334 State & Zip		
	561-968- Daytime 1	3290 Felephone number	E Hall FAM 5 & 1033	

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

FILED

ARTICLES OF INCORPORATION

JAN 23 PM 12: 08

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

ARTICLE I NAME The name of the corporation shall be: MCNair Pools, Inc.

ARTICLE II PRINCIPAL OFFICE

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

5962 Ithaca Circle West Lake Worth, Florida 33463

SHARES ARTICLE III

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

100 shares

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

John Michael McNair 5962 Ithaca Circle West Lake Worth, Florida 33463 ARTICLE V INCORPORATOR

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

John Michael McNair

5962 Ithaca Circle West

Lake Worth, Horida 33463

(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

Signature/Registered Agent