7/06/98 11:07 AM

## FLORIDA DIVISION OF CORPORATIONS

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(((H98000012411 8)))

TO: DIVISION OF CORPORATIONS

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FAX #:

FROM: AL CLARK

072100000173

ACCT#:

CONTACT: AL CLARK

PHONE: (813)398-6011

FAX #:

(813) 397-5189

NAME: AQUA COMFORT, INC.

AUDIT NUMBER...... H98000012411

DOC TYPE..... FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS... 3 (4)

DEL.METHOD..

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\*\* ENTER 'M' FOR MENU. \*\*

ENTER SELECTION AND <CR>:

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## 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.

#### NAME ARTICLE I

The name of the corporation shall be

Aqua Comfort, Inc.

#### PRINCIPAL OFFICE ARTICLE II

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

1923 N. Fork Circle Clearwater, FL. 33760

#### ARTICLE III SHARES

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

## 1000 SHARES NÖ PAR

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

prepared by:

Name: Patricia White Address: 1923 N. Fork Circle

Clearwater, Fl. 33760 PH#813-532-8426

Accounting & Tax Help, INC. 8668 PARK BLVD Suite .A SEMINOLE, Florida 33777

H980000 12411 8

PHONE NO. : 8135287222 393 1766 Jul. 06 1998 10:42AM P19

H980000 12411 8

## 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):

Patricia White 1923 N. Fork Circle Clearwater, FL, 33760

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this
6th day of July 1998.
(An additional article must be added if an effective date is requested.)
* Parain White
Signature
Signature
Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

ž,	The name of the corporation is:		
	Paus	Comfort Inc.	

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

Accounting & Tax Help, INC. (Name)

8668 PARK BLVD. Suite A (P.O. Box not acceptable)

SEMINOLE, Florida 33777 (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.

H98 0000 12411 8 PRESIDENT