

P98000069474

TRANSMITTAL LETTER

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

100002608551--3  
-08/05/98--01112--002  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: ALL WATER Services inc.  
(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

FROM: Robin Anne Brigmond.  
Name (Printed or typed)

1420 EAST Ave.  
Address

Clermont FL. 34711  
City, State & Zip

352-394-3614  
Daytime Telephone number

FILED  
98 AUG -5 PM 2:17  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

CB  
8-10-98  
4

## 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:

*All water Services inc.*

### ARTICLE II PRINCIPAL OFFICE

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

*1420 East Av.  
Clermont FL 34711*

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### ARTICLE III SHARES

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

*500 Shares @ 1.00 par value*

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*Robin Anne Brigmond  
1420 East Av.  
Clermont FL 34711*

**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):

*Robin Anne Brigmond*  
*1420 East Ave.*  
*Dermont FL 34711*

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

31<sup>st</sup> day of JULY, 19 98.

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

*Robin Anne Brigmond*  
\_\_\_\_\_  
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.**

**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 ALL WATER SERVICES INC

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

ROBIN Anne Brigmond  
(NAME)

1400 EAST AVE  
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

CLERMONT, FLA, 34711  
(CITY/STATE/ZIP)

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*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.*

Robin Anne Brigmond  
(SIGNATURE)

7/31/98  
(DATE)