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

800002821398--3 -03/29/93 - -01041 ---007 \*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT:

Aquarius Pool &Heating Service 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 Fe

\$78.75 Filing Fee & Certificate

\$122.50

\$131.25

Filing Fee & Certified Copy Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Samuel S. Greenway

Name (Printed or typed)

3049 Marlo Blvd

Address

Clearwater, FL

City, State & Zip

727-725-5959

Daytime Telephone number

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



# ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be: Aquarius Pool & Heating Service Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3049 Marlo Blvd. Clearwater, FL 33759

# ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 shares @ 1.00/par

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Samuel S. Greenway 3049 Marlo Blvd. Clearwater, FL 33759

### ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Samuel S. Greenway 3049 Marko Blvd. Clearwater, FL 33759

Signature/Incorporator

3/18/99

(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

Date