Filing Fee: \$150.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Division of Business Services
148 W. River Street Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

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fore	rsuant to the provisions of Section 7-16-49 of the General La eign limited liability company hereby applies for a Certificate and, and for that purpose submits the following statement:	aws of Rhode Island, l956 of Registration to transac	3, as amended, the undersigned t business in the state of Rhode		
1.	The name of the limited liability company is:		en e		
	Continental Pools, LLC				
	This company has been duly organized in its state of formation as a	low-profit (Imited liability compa	ny. (Check box if applicable)		
2.	The name, if different, under which it proposes to register ar	nd transact business in Rh	node Island is:		
3.	The limited liability company is organized under the laws of	Delaware			
4.	The date of its organization is 12/19/2012	· · · · · · · · · · · · · · · · · · ·			
5.	The period of duration of the limited liability company is (if p	erpetual, so state) <u>perpe</u>	tual		
6.	The address of the limited liability company's resident agent	t in Rhode Island is:			
,	222 Jefferson Boulevard, Suite 200	Warwick	, RI 02888		
	(Street Address, not P.O. Box)	(City/Town)	(Zip Code)		
	and the name of the resident agent at such address is Cor	(Name of Agent)			
7.	The secretary of state is appointed the agent of the foreig time there is no resident agent or if the resident agent cann diligence.	n limited liability compan oot be found or served foll	y for service of process if at any owing the exercise of reasonable		
8.	The address of any office required to be maintained in the limited liability company is organized is:	ne state or other jurisdict	tion under the laws of which the		
	N.A.				
			ro C		
		H #L.			
9.	The mailing address for the limited liability company is:	MAY 2	1 2017.		
	8520 Corridor Road, Suite B	m Ch 224666			
	Savage, MD 20763	By Or o	447009		

Form No. 450 Revised: 07/12

•	iability Company (check <u>one</u> only):
 A. The limited liability company i No. 11 – DO <u>NOT</u> LIST ANY 	is to be managed by its members. (If you have checked this box, go to iten NAMES IN SECTION B.)
	<u>or</u>
company has managers at	$\sqrt{1}$ is to be managed $\sqrt{1}$ by one (1) or more managers. (If the limited liability the time of the filing of these Articles of Organization, state the name and
<u>Manager</u>	Address
Michael L. Kinloch	8520 Corridor Rd., Suite B; Savage, MD 20763
Mitchell B. Friedlander	11515 Cronnidge Drive, Suite Q; Owlngs Mills, MD 21117
Richard C. Naden	11515 Cronridge Drive, Sulte Q; Owings Mills, MD 21117
11. This application is accompanied	by a certificate of good standing duly authenticated by the secretary of state or oth
This application is accompanied authorized officer of the jurisdict	by a certificate of good standing duly authenticated by the secretary of state or oth ion under which the foreign limited liability company was organized.
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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CONTINENTAL POOLS, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTIETH DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CONTINENTAL POOLS, LLC" WAS FORMED ON THE NINETEENTH DAY OF DECEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5264070 8300

140670387

Jeffrey W. Bullock, Secretary of State **AUTHENTY CATION:** 1386424

DATE: 05-20-14

You may verify this certificate online at corp. delaware.gov/authver.shtml