

# State of Idaho

Office of the Secretary of State

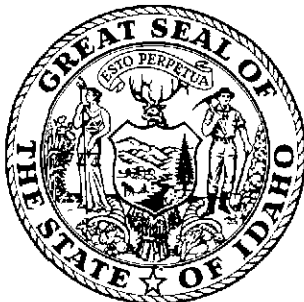
**CERTIFICATE OF REGISTRATION  
OF  
POOLSAFE, INC.**

File Number C 214340

I, LAWRENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: June 30, 2017



*Lawrence Denney*  
SECRETARY OF STATE

By *Sheryl Daltner*



# FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in duplicate.

2017 JUN 30 PM 3:09

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the entity is: Poolsafe, Inc.
2. The name which it shall use in Idaho is: \_\_\_\_\_  
(Enter a name here, only if you are required to adopt an alternate name)
3. Select the type of entity you wish to register:
 

<input checked="" type="checkbox"/> Business Corporation	<input type="checkbox"/> General Partnership
<input type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> General Cooperative Association
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership (Including a limited liability limited partnership)
<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Statutory Trust, Business Trust, or Common-law Business Trust
4. Other: \_\_\_\_\_  
(Use "Other" only if your foreign entity type is not listed above, and enter the type here.)
4. Jurisdiction of formation: California  
(Provide the domestic jurisdiction where the entity was formed)
5. The address of its principal office is:  
3618 E Newby Street, Nampa ID 83687  
(Street Address)  
\_\_\_\_\_  
(Mailing Address, if different)
6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:  
\_\_\_\_\_  
(Street Address)  
\_\_\_\_\_  
(Mailing Address, if different)
7. The mailing address to which correspondence should be addressed, if different from item 5, is:  
\_\_\_\_\_  
(Address)
8. Name and street address of registered agent in Idaho:  
Tom Callahan 3618 E Newby Street, Nampa ID 83687  
(Name) (Address)
9. The name, capacity, and mailing address of at least one governor:  

<u>Tom Callahan</u>	<u>VP</u>	<u>3618 E Newby Street, Nampa ID 83687</u>
(Name)	(Capacity)	(Address)

_____ (Name)	_____ (Capacity)	_____ (Address)
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Typed Name: Tom Callahan

Signature: \_\_\_\_\_

Capacity: VP

Secretary of State use only

IDAHO SECRETARY OF STATE

06/30/2017 05:00

CR:26761 CT:342025 BH:1591645  
10 100.00 = 100.00 FOR REG ST #2

C214340

# State of California

## Secretary of State

### CERTIFICATE OF STATUS

ENTITY NAME:

POOLSAFE, INC.

FILE NUMBER: C2113119  
FORMATION DATE: 06/25/1998  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 20, 2017.

ALEX PADILLA  
Secretary of State