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TRANSMITTAL LETTER

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

SUBJECT: A.T.A.K	. PEST MANAGEMANT, INC. (PROPOSED CORPORA	ATE NAME – <u>MÚST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	I a check for:
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: TIM	MOTHY R. SMITH		
	Name	e (Printed or typed)	
	308 SATSUMA DRIVE		
		Address	

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

City, State & Zip

Daytime Telephone number

SANFORD, FLORIDA 32771

407-320-1968

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

A.T.A.K. PEST MANAGEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 308 SATSUMA DR. SANFORD,FLORIDA 32771

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE GENERAL NATURE OF THE BUSINESS TO BE TRANSACTED BY THIS CORPORATION IS :PEST MANAGMENT. TO ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND OF THIS STATE.

ARTICLE IV SHARES

The number of shares of stock is: (1000) ONE THOUSAND

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): TIMOTHY R. SMITH,PRESIDENT 308 SATUMA DRIVE SANFORD,FLORIDA 32771 KIMBERLY W. SMITH,VICE PRESIDENT 308 SATUMA DRIVE SANFORD,FLORIDA 32771

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

TIMOTHY R. SMITH 308 SATSUMA DRIVE SANFORD, FLORIDA 32771

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: TIMOTHY R. SMITH

308 SATSUMA DRIVE SANFORD,FLORIDA 32771

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Tim OTHY R Smith

2 /8 0

Data

Signature/Registered Agent

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Date

Signature/Incorporator

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