I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTONIO J BUSQUETS

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# F2000005497

Entity Name: PURCOR PEST SOLUTIONS OF FLORIDA, INC.

Current Principal Place of Business:

6304 BENJAMIN ROAD SUITE 503 TAMPA, FL 33634

Current Mailing Address:

6304 BENJAMIN ROAD SUITE 503 TAMPA, FL 33634 US

FEI Number: 84-4043618

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	т	Title	VP
Name	BRADFORD, DAVID	Name	BUSQUETS, ANTONIO J
Address	6304 BENJAMIN ROAD SUITE 503	Address	6304 BENJAMIN ROAD SUITE 503
City-State-Zip:	TAMPA FL 33634	City-State-Zip:	TAMPA FL 33634

VICE PRESIDENT

Certificate of Status Desired: No

FILED Jan 25, 2023 Secretary of State 8283397254CC

> 01/25/2023 Date

Date