205819

(Re	equestor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

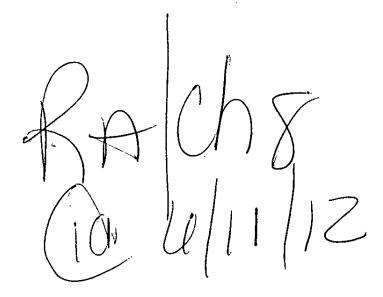
Office Use Only



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06/08/12--01001--006 **35.00

SECRETARY OF CORPORAGES



COVER LETTER

то:	Amendr Division	nent Section n of Corporations					
SUBJE	ECT:	Florida Pest Con		ical Co. Corporation			
DOCU	MENT !	NUMBER: 20581	.9				
The end	closed St	atement of Change of	Registered Offic	e/Agent and fee are submitted for fil	ing.		
Please	return all	correspondence conce	erning this matte	r to the following:			
		Randy S.					
			Name of Co	ntact Person			
Florida Pest Control & Chemical Co.							
			Firm/Co	ompany			
	116 N.W. 16th Ave.						
			Add	ress			
		Gainesvil	le, FL 3260	1			
			City/State a	nd Zip Code			
			@FlaPest.com				
	E-mail address: (to be used for future annual report notification)						
For fur	ther infoi	mation concerning thi	s matter, please	call:			
Ranc	iy S. J	ohnson Vame of Contact Perso		at (<u>352</u>) <u>376-2661</u> Area Code & Daytime Telepl	X 1		
	1	vame of Contact Perso	11	Area Code & Daytime Telepi	ione Number		
Enclose	ed is a \$3	5.00 check made paya	ble to the Depar	tment of State.			
		Mailing Addr Amendment Division of O P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Amendment Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508 hange is submitted for a corporation organized under t	the laws of the State of Florida				
	der to change its registered office or registered agent, o	·				
	ame of the corporation: Florida Pest Control & Chemical Co.					
2. The principal	al office address: 116 N.W. 16th Ave.					
	Gainesville, FL 32601					
3. The mailing a	address (if different): Same as above					
4. Date of incorp	orporation/qualification: 1957 Docum	ment number: 205819				
	nd street address of the current registered agent and reg artment of State: (If resigned, enter resigned)	gistered office on file with the				
	Dale L. Godshall					
	116 N.W. 16th Ave.					
	Gainesville, FL 32601					
6. The name and (if changed):	nd street address of the new registered agent (if change :	9				
	Randy S. Johnson	TO JUN OF THE PROPERTY OF THE				
	116 N.W. 16th Ave.					
	P.O. Box NOT acceptable					
	Gainesville, FL 32601					
The street address changed will	ress of its registered office and the street address of the identical.	the business office of its registered agent				
Such change was authorized by the	was authorized by resolution duly adopted by its boat the board, or the corporation has been notified in wr	rd of directors or by an officer so iting of the change.				
Signatu	Ture of an efficer or director	psey R. Sapp, Jr. Pres/CEO Printed or typed name and little				
_	of the appointment as registered agent and agree to a to comply with the provisions of all statutes relative and I am familiar with and accept the obligation of neing filed merely to reflect a change in the registered as been notified in writing of this change.	-,				
1/DNOn	6-	-5-12				
Sig	ignature of Registered Agent	Date				
If signing on be	pehalf of an entity:					
	Typed or Printed Name					
	* * * FILING FEE: \$35.00	* * *				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)