Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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(((H16000070848 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023

: (850)205-8842

Fax Number

: (850)878~5368

Please give to:

245,6030

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION

Cook's Pest Control, Inc.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 954 |
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Y SULKER



March 22, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: COOK'S PEST CONTROL, INC

REF: W16000021172

245-40³⁰

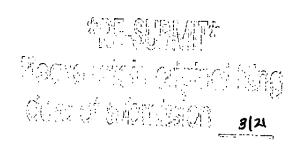
We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Yasemin Y Sulker Regulatory Specialist II FAX Aud. #: H16000070848 Letter Number: 716A00005788



COVER LETTER

| TO: Regis | stration Section of Corpor | | | | |
|--|--|---|--------------|--|--|
| SUBJECT: | Cook's Pest (| Control, Inc. | | • | |
| 70202011 | | Name of | corporation | - must include suffix | |
| Dear Sir or M | adam: | | | | |
| "Certificate of | f Existence," | by Foreign Corp or "Certificate of orporation to tran | f Good Star | iding" and check are su | act Business in Florida," bimitted to register the |
| Please return | all correspon | dence concerning | this matter | to the following: | |
| Arthur Orr | | | | | |
| | | | Name of | Person | |
| Cook's Pest Co | ntrol, Inc. | | | | |
| | | | Firm/Com | pany | · |
| 1741 5th Aven | ue SE | | | • | |
| | | ··············· | Addre | | |
| Decatur, AL 3 | 15601 | | | | |
| | · | | City/State a | nd Zip code | |
| aorr@cookspes | t.com | | | | |
| | | E-mail address: (| to be used i | or future annual report | notification) |
| For further inf | ormation con | cerning this matt | er, please c | all: | |
| Arthur Orr | | n.t | , 256 | 355-3285 | |
| Name | of Person | at | Area Code | Daytime Telep | ohone Number |
| Regist Divisio Cliftor 2661 E Tallah | ration Section on of Corpora Building Executive Cer assee, FL 32 | ations ater Circle | t: | MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I | Section orporations 7 |
| □ \$70.00 Fili | ng Foc 🗇 | \$78.75 Filing Fo | | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certificate of Status & Certified Copy |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| (If name unavail | able in Florida, enter alternate corporate | name adopted for the purpose of transacting | business in Florid | la) |
|---|--|--|--------------------|-------------|
| 2. Alabama | | 3. | | |
| (State or countr | - | | icable) | |
| 4 | | 5. Perpetual (Date of duration, if other th | <u></u> | |
| (Date | of incorporation) | (Date of duration, if other th | an perpetual) | |
| 6 | | | | |
| | | iness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liability |) | |
| _ 1741 5th Avenue | SE, Decatur, AL 35601 | 007,1302, 1.10., to determine penalty incoming | , | |
| 7 | | Principal office address) | | |
| P.O. Box 669, D | ecatur, AL 35602 | | :, | ਰੀ |
| | (Current | mailing address, if different) | ~ | 100 100 |
| | | | | 10 |
| 8. Name and stree | t address of Florida registered agent | : (P.O. Box NOT acceptable) | | |
| Name: | C T Corporation System | | 1 April | TE C |
| | 1200 South Pine Island Road | | | ვ: 0 |
| Office Address: | | | 16 16 | മാ |
| | Plantation, FL 33324 | , Florida(Zip code) | | |
| | (City) | (Zip code) | | |
| | (Ch) | ` ' | | |
| | | | | |
| 9. Registered age Having been nam | ent's acceptance: ed as registered agent and to accept | t service of process for the above stated | | |
| 9. Registered age Having been nam designated in this | ent's acceptance: ed as registered agent and to accept application, I hereby accept the app | t service of process for the above stated op pointment as registered agent and agree | to act in this c | apacity. |
| 9. Registered age Having been nam designated in this further agree to co | ent's acceptance: ed as registered agent and to accept application, I hereby accept the app comply with the provisions of all state | t service of process for the above stated | to act in this c | apacity. |
| 9. Registered age Having been nam designated in this further agree to co | ent's acceptance: ed as registered agent and to accept application, I hereby accept the app comply with the provisions of all state | t service of process for the above stated op pointment as registered agent and agree outes relative to the proper and complete ions of my position as registered agent. | to act in this c | apacity. |

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

| A. DIRI | ECTORS | | |
|-------------|---|---|---|
| Chairman | John Cook Jr. 1741 5th Avenue SE | | , <u>.</u> |
| Address: | Decatur, AL 35601 | | |
| - | Detail, AL 33001 | | ···· |
| Vice Chair | rman: | | |
| Address: | | | • |
| - | | | |
| Director: | | | |
| Address: | | | |
| _ | | | |
| Director: | | | |
| Address: _ | | | |
| | | | |
| B. OFFI | CERS | | |
| President: | James M. Aycock | | |
| Address: | 1741 5th Avenue SE | <u> </u> | <u></u> 5 |
| ! | Decatur, AL 35601 | ·- · | Š |
| Vice Presid | Joseph K. Harris | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| Address: _ | 741 5th Avenue SE | 1 | Pr |
| <u>l</u> | Decatur, AL 35601 | Trigger Trig Trig Trig Trig Trig Trig Trig Tri | 3; 0 |
| Secretary: | Lyn S. Cook | <i>!</i> | 7 |
| Address: _ | 741 5th Avenue SE, Decetur, AL 35601 | | |
| Treasurer: | Lyn S. Cook | | |
| Address: _ | 741 5th Avenue SE, Decatur, AL 35601 | | |
| NOTE: If | necessary, you may attach an addendum to the application listing additional officers and/or | director | rs. |
| The officer | Signature of Director or Officer or or director signing this document (and who is listed in number 11 above) affirms that the fad that he or she is aware that false information submitted in a document to the Department or see felony as provided for in s.817.155, F.S. | icts state f State c | ed herein constitutes |
| 3. James | M. Aycock, President and CEO | | |
| | (Typed or printed name and capacity of person signing application) | | |

John H. Merrill Secretary of State

P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Cook's Pest Control, Inc. was formed in Morgan County, Alabama on January 28, 1964. The Alabama Entity Identification number for this entity is 021-019. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20160309000013648

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

3/9/2016

Date

X. W. Merill

John H. Merrill

Secretary of State