520529

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

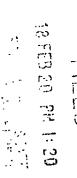
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: PESTGO EXTER	RMINATORS, INC				
DOCUMENT NUMB	ER:					
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.				
Please return all corresp	oondence concerning this ma	tter to the following:				
	VANCE VENEGAS					
-		Name of Contact Person				
	PESTGO EXTERMINATO	PRS, INC				
-	<u> </u>	Firm/ Company				
	4425 N CORTEZ AVE					
-	Address					
	TAMPA, FL 33614-7019					
-		City/ State and Zip Code				
vano	e@pestgoexterminatorsinc.c	om	√			
-	E-mail address: (to be us	sed for future annual report				
For further information	concerning this matter, pleas	se call:				
VANCE VENEGAS		at (813	_) 917-2373			
Name of Contact Person		Area Coo	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:			
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ame Divis P.O.	ing Address Indment Section Ission of Corporations Box 6327 Ishassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301			

Articles of Amendment to Articles of Incorporation of

PESTGO EXTERMINATORS, INC.

Name of Community	
J20529	ently filed with the Florida Dept. of State)
	er of Corporation (if known)
	this Floridu Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	
and the corporation	
name must be distinguishable and contain the word "corpor, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," o word "chartered," "professional association," or the abbreviation. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	or "Co". A professional corporation name must contain the
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	
Name of New Registered Agent	
/Elmid	a street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili	
Signature of Ne	w Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doc is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
l) Change	STD	GEORGE VENEGAS	1525 RIVER LANE	
Add X Remove			TAMPA, FL 33603	
2) Change	PD	LUANA D. VENEGAS	1525 RIVER LANE	
Add X Remove			TAMPA. FL 33603	
3) Change				
Add				
4) Change				
Remove				
5) Change Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(y noi appacable, maicale wax)	

· · · · · · · · · · · · · · · · · · ·	other than the
date this document was signed.	
02/16/2018 Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	: listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voling group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
02/16/2018	
Dated	
Signature / and / line and	
(By a director, president or other officer) if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
appointed indictary by that indictary)	
VANCE VENEGAS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	