

Division of Corporations

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**L08000074855**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H100000874143)))



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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.  
Account Number : 120010000062  
Phone : (323) 962-8600  
Fax Number : (323) 962-3889

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

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**FILED**  
10 APR 16 AM 9:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
A BETTER BUGGER, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

**D. BRUCE**

APR 19 2010

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Corporate Filing Menu

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**EXAMINER**

**RECEIVED**  
10 APR 16 PM 12:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: A BETTER BUGGER, LLC**

(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tony Burroughs

(Name of Person)

Legalzoom.com, Inc.

(Firm/Company)

7083 Hollywood Blvd., Suite 180

(Address)

Los Angeles, CA 90028

(City/State and Zip Code)

For further information concerning this matter, please call:

Tony Burroughs

(Name of Person)

at ( 323 ) 962-8600

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☒ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**FILED**  
**10 APR 16 AM 11:39**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**A BETTER BUGGER, LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/10/2008 and assigned  
Florida document number LO8000024855.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

All Pest Off Exterminators, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

(Enter Florida street address)

Florida

(City)

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

(If Changing Registered Agent: Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager.

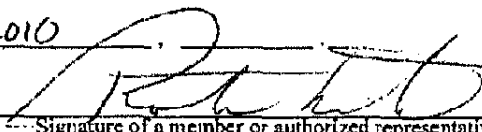
MGRM = Managing Member.

Title	Name	Address	Type of Action
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated

4/16/2010



Signature of a member or authorized representative of a member

Robert Maystre, Managing Member

Typed or printed name of signee

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Filing Fee: \$25.00

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