

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000036402

**FILED**  
**Jan 17, 2011**  
**Secretary of State**

**Entity Name:** HOUSEHOLD TERMITE & PEST CONTROL L.L.C.

**Current Principal Place of Business:**

5355 WILLIAMS STREET  
MILTON, FL 32570 SR

**New Principal Place of Business:**

**Current Mailing Address:**

5355 WILLIAMS STREET  
MILTON, FL 32570 SR

**New Mailing Address:**

**FEI Number:** 90-0116383

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BURMEISTER, DANIEL  
5355 WILLIAMS STREET  
MILTON, FL 32570 US

**Name and Address of New Registered Agent:**

BURMEISTER, DANIEL E  
5355 WILLIAMS STREET  
MILTON, FL 32570 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: DANIEL E. BURMEISTER

01/17/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BURMEISTER, DANIEL E  
Address: 5355 WILLIAMS STREET  
City-St-Zip: MILTON, FL 32570 SR

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DANIEL E. BURMEISTER

MGRM

01/17/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date