

08/30/2013

10:03

SHUMAKER LOOP &amp; KENDRICK

08/30/2013

001/003

Division of Corporations

Page 1 of 1

L13 000123656

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.**

(((H13000193621 3)))



H130001936213ABC-

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

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

From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP  
Account Number : 075500004387  
Phone : (813) 229-7600  
Fax Number : (813) 229-1660

2013 AUG 30 AM 9:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

Email Address: gyadley@sik-law.com

RECEIVED

13 AUG 30 PM 3:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.**  
**Skyline Pest Solutions, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

SEP - 3 2013

I CLINE

Electronic Filing Menu

Corporate Filing Menu

Help

H13000193621 3

**ARTICLES OF ORGANIZATION  
SKYLINE PEST SOLUTIONS, LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: Skyline Pest Solutions, LLC.

**ARTICLE II - Address:**

The street and mailing address of the principal office of the Limited Liability Company is:

6225 Tower Lane  
Sarasota, FL 34240

**ARTICLE III - Registered Agent and Registered Office:**

The name and the Florida street address of the registered agent are:

Gregory C. Yadley, Esq.  
101 E. Kennedy Blvd., Suite 2800  
Tampa, Florida 33602

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 30th day of August, 2013.



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Paul R. Lynch

Typed or printed name of signee

2013 AUG 30 AM 9:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

H13000193621 3

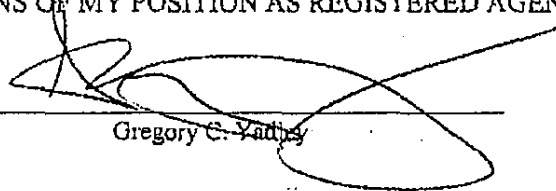
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is Skyline Pest Solutions, LLC.
2. The name and the Florida street address of the registered agent are:

Gregory C. Yadley, Esq.  
101 E. Kennedy Blvd., Suite 2800  
Tampa, Florida 33602

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

  
\_\_\_\_\_  
Gregory C. Yadley

2013 AUG 30 AM 9:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED