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Account Number : 075500004387
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FLORIDA LIMITED LIABILITY CO.
Pest Solutions Plus Naples, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION
OF
PEST SOLUTIONS PLUS NAPLES, LLC**

ARTICLE I – Name:

The name of the Limited Liability Company is **Pest Solutions Plus Naples, LLC.**

ARTICLE II – Address:

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

10801 Sunset Plaza Cir.
Fort Myers, FL 33908

ARTICLE III– Management:

The Limited Liability Company will be manager-managed. The name, title and address of the initial managers of the Limited Liability Company are:

Title	Name and Address
MGR	Lawn & Pest Management of Florida, LLC 10801 Sunset Plaza Cir. Fort Myers, FL 33908

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IN AND FOR THE COUNTY OF S.W. FLORIDA

10-10-23

ARTICLE IV – Indemnification:

The Limited Liability Company shall, to the full extent permitted by Section 605.0408, Florida Statutes, as amended from time to time, indemnify all persons whom it may indemnify pursuant thereto. The indemnification provided by this Article IV shall not limit or exclude any rights, indemnities or limitations of liabilities to which any person may be entitled, whether as a matter of law, under the regulations of the limited liability company, by agreement or otherwise.

ARTICLE V - Registered Agent, Registered Office & Registered Agent's Signature

The name and the street address of the initial registered agent of the Limited Liability Company are:

Platinum Agent Services LLC
155 Office Plaza Dr
Tallahassee, FL 32301

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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 9th day of October, 2024.

/s/Thomas McDonnell, Esq.

Signature of an authorized representative of a member

(In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided in section 817.155, Florida Statutes.)

Thomas McDonnell, Esq.

Typed or printed name of signee

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

PURSUANT TO THE PROVISIONS OF CHAPTER 605, 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 **PEST SOLUTIONS PLUS NAPLES, LLC**.
2. The name and the Florida street address of the registered agent are:

Platinum Agent Services LLC
155 Office Plaza Dr
Tallahassee, FL 32301

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.

/s/ Steven Friedman

Steven Friedman – President for Platinum Agent Services LLC
Registered Agent

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