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2005 FEB -1 SECRETARY OF STATE (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP ☐ WAIT MAIL (Business Entity Name) (Document Number) Certified Copies _____ Certificates of Status Special Instructions to Filing Officer:

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TRANSMITTAL LETTER

2005 FEB - 1 P 1: 10

SECRETARY OF STATE

TO: Registration Section Division of Corporations

SUBJECT:	MOSQUITO	NIX OF	SOUTHWEST	FLORIDA,	LLC			
_	(Name of Limited Liability Company)							

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

D. BENHAM	KIRK, JR.
(N	ame of Person)
D. BENHAM K	IRK, JR., P.C.
(F	irm/Company)
440 11	44-0
119 N. Robi	nson, Suite 1120
	(Address)
Oklahama Ci	tr. Oklahoma 72102
	ty, Oklahoma 73102
(City/S	State and Zip Code)
For further information concerning this matter, pl	lease call:
D. Benham Kirk, Jr.	at (405) 606-3333
(Name of Person)	(Area Code & Daytime Telephone Number)
(Name of Forest)	(1.1.0.1 0.0.1 0.0 2.0.) 1.1.1.1 1.1.1.1 1.1.1.1 1.1.1.1 1.1.1.1 1.1.1 1.1.1 1.1.1 1.1.1 1.1.1 1.1.1 1.1.1 1.1
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street	P.O. Box 6327
Tallahassee, Florida 32399	Tallahassee, Florida 32314

Enclosed is a check for the following amount:

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUFHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. MOSQUITO NIX OF SOUTHWEST FLORIDA, LLC
(Name of Foreign Limited Liability Company)

2. OKLAHOMA
3. 84-166-7840
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)

co	ompany is organized)	Ü	•	`	ŕ	••	,	
ŧ	January 20, 2005		· 5.	Perpetual	-1			
	(Date of Organization)			(Duration: Year limite exist or "perpetual")	ed liabili	ty comp	any will ceas	e to
5.				005 (Approx.)				
,	(Date first tran (See sections 60	sacted business 8.501 & 608.50	in Florio 2 F.S. to	la, if prior to registratio determine penalty liabi	n.) lity)			
,	1623	7 West Un	ivers	sity Parkway				

7. 1627 West University Parkway

Sarasota, Florida 34243

(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here $\boxed{\chi}$

9. The name and usual business addresses of the managing members or managers are as follows:

Reece D. Lansberg

1627 West University Parkway

Sarasota, FL 34243

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: automated insect

control and all other lawful purposes

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Reece D. Lansberg

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, 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:
MOSQUITO NIX OF SOUTHWEST FLORIDA, LLC
2. The name and the Florida street address of the registered agent and office are:
Reece D. Lansberg
(Name)
1627 West University Parkway
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Sarasota FL 34243
City/State/Zip
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 as provided for in Chapter 608, Florida Statutes. Metalogical Statutes (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

OFFICE OF THE SECRETARY OF STATE

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY COMPANY

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that MOSQUITONIX OF SQUTHWEST FLORIDA LLC whose registered agent is D. BENHAM KIRK JR, with its registered office at 119 N ROBINSON STE 1120 OKLAHOMA CITY 73102 USA Oklahoma is a Domestic Limited Liability Company duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



NVAVIVE

IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this <u>28th</u>, day of <u>January</u>, <u>2005</u>.

Secretary Of State

M. hisan Saveye