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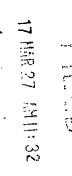
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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O SIMMONS MAR 3 0 2017

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Insight Pest Solutions FLL, 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:
Martin Nelson
Insight Pest Solutions FLL, LLC Firm/Company
3000 N. University Ave Ste 250
PROVO, UT 84604 City/State and Zip Code
M. nelson a choose vantage. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Martin Mulson at (202) 768 · 5602 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\begin{align*} \text{S125.00 Filing Fee} & \Bigcup \text{\$130.00 Filing Fee} & \Bigcup \text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certificate of Status & Certified Copy} \$\begin{align*} \text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certificate of Status & Certified Copy} \$\begin{align*} \text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certificate of Status & Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$160.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$155.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$155.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$155.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$155.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$155.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$155.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} & \Bigcup \text{\$155.00 Filing Fee}, Certified Copy} \$\text{\$155.00 Filing Fee} &

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Insight Pest Solutions FLL, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")
2 Utah 3 82-0596888
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 4/1/2017
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 3640-A Park Central Blvd North
0 0 1 -1 27-11
Pompano Beach, FL 33064 (Street Address of Principal Office)
6. 3000 N. University Ave Ste 250
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: Brian Petty
Office Address: 3640-A Park Central Blvd North
Office Address: 3640-A Park Central Blvd North Pompano Beach, The , Florida 33064 (City) (Zip code)
Registered agent's acceptance:
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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree
to complywith 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.
Xhla (St.
(Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Shandon Cole-Director - 4 Parkside Lane Sandy UT 84092
Tom Karren - Director - 10588 Sahalee Cedar Hills, UT 84062
MWAIN Nelson - CFO - 10 Western Hills DR Henderson NV 89052 Adam Villareal - Director - 904 Savoy Way Apex, MC 27502 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
Genature of an authorized person
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
Martin Nelson Typed or printed name of signee
ryped or printed name or signed



Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utah Residents Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

03/21/2017 10279725-016003212017-752435

CERTIFICATE OF EXISTENCE

Registration Number:

10279725-0160

Business Name:

INSIGHT PEST SOLUTIONS FLL LLC

Registered Date:

February 27, 2017

Entity Type:

LLC - Domestic

Current Status:

Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Hathy Berg

Kathy Berg Director Division of Corporations and Commercial Code