

corrected; please honor original submission date of 3/20/2024

M2200011674

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FS PEST CONTROL LLC

***CORRECTED; PLEASE
HONOR ORIGINAL
SUBMISSION DATE OF
3/15/2024

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

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3/15/2024

FILED
2024 MAR 20 AM 10:06
FLORIDA DEPARTMENT OF STATE

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2024 MAR 21 PM 3:15
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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T. LEMIEUX

MAR 22 2024

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COVER LETTER

H24000106511

TO: Registration Section
Division of Corporations

SUBJECT: FS Pest Control LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Person

Capitol Services - Corporate Filings Team

Firm/Company

515 East Park Avenue 2nd Fl

Address

Tallahassee, FL 32301

City/State and Zip Code

bellis@rockitpest.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at (**855**) **498 - 5500**

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☒ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

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SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: **FS Pest Control LLC**

Enter new principal office address, if applicable:

(Principal office address

MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: **M22000011674**

3. Jurisdiction of its organization: **Delaware**

4. Date authorized to do business in Florida: **July 26, 2022**

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: **Rocket Pest Control GA LLC**

(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida Street Address

City, Florida

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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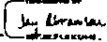
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

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8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> Add
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> Remove
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9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

 Signature of the authorized representative

Jay Abramson

03.19.2024

Typed or printed name of signee

Filing Fee: \$25.00

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "FS PEST CONTROL LLC" FILED A RESTATED CERTIFICATE, CHANGING ITS NAME TO "FUTURE SERVICES PEST CONTROL LLC", ON THE TWENTY-NINTH DAY OF JUNE, A.D. 2023, AT 4:05 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THE SAID "FUTURE SERVICES PEST CONTROL LLC" FILED A RESTATED CERTIFICATE, CHANGING ITS NAME TO "ROCKET PEST CONTROL GA LLC", ON THE THIRTIETH DAY OF OCTOBER, A.D. 2023, AT 2:07 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ROCKET PEST CONTROL GA LLC", IS THE LAST KNOWN TITLE OF RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY.



A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

6901497 8321
SR# 20241104364

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203078267
Date: 03-21-24

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