M40510

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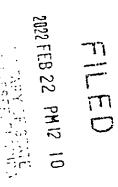
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A. RAMSEY MAR 0.2 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 1	U.S.A.	PEST CONTROL, INC	2.		
DOCUMENT NUMBER:	M40510				
The enclosed Articles of Amenda	nent and fee are sub	mitted for filing.			
Please return all correspondence of	concerning this mat	er to the following:			
	Winston H. Sosa				
	Winston H	Name of Contact Person Sosa, Attorney	•		
			ac baw		
	700	Firm/ Company			
	782 NW 4	42 Avenue Suit	<u>e 537</u>		
Address Miami, Florida 33126					
City/ State and Zip Code Winston @winsosa.com					
For further information concerning	g this matter, please	e call:	SER		
Winston H. Sosa		at (305	461 3537		
Name of Contact I	erson	Area Code & Daytime Telephone Number			
Enclosed is a check for the follow	ring amount made p	ayable to the Florida Dep	partment of State:		
	.75 Filing Fee & ificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED
2022 FEB 22 PM 12 10

U.S.A. Pest Co.	ntrol, Inc. PH12 10
(Name of Corporation as currently	y filed with the Florida Dept. of State)
M40510	The same
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
If amending name, enter the new name of the corporation:	
N/A	The new
ame must be distinguishable and contain the word "corporation," "c Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp" 1. professional corporation name must contain the word
Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office addr	
new registered agent and/or the new registered office address:	
Name of New Registered Agent Yamilec Caste	llanos
24430 SW 157 (Florida streem Homestead New Registered Office Address:	, Florida33031
•	(City) (Zip Code)
lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w Signature of New Re Yami lec Castellanos	with and accept the obligations of the position. Segistered Agent, if changing
heck if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (1)	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President: V = Vice President: T = Treasurer: S = Secretary: D = Director: TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones. V as Remove, and Sally Smith, SV as an Add. Example:

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One) 1) Change	<u>Title</u> P	<u>Name</u> Francis∞ Vigil	Address 24430 SW 157 Ave. Homestead, Fl. 33031
Add		-	
X Remove 2) Change	PSTD	Yamilec Castellanos	24430 SW 157 Avenue Homestead, Flowida 33031
Add Remove			
3) Change			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

(Attach additt	or adding additional Articles, enter change(s) here: ional sheets, if necessary). (Be specific)
	N/A
If an amend	ment provides for an exchange, reclassification, or cancellation of issued shares,
provisions (for implementing the amendment if not contained in the amendment itself:
(if not a	pplicable, indicate N/A)
	N/A
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:date this document was signed.	December 21, 2021	, if other than the
Effective date if applicable:	December 21, 2021	
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this block does n document's effective date on the Department of		nents, this date will not be listed as the
Adoption of Amendment(s) (CF	IECK ONE)	
☐ The amendment(s) was/were adopted by the action was not required.	incorporators, or board of directors without sha	reholder action and shareholder
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		amendment(s)
☐ The amendment(s) was/were approved by th must be separately provided for each voting	e shareholders through voting groups. The following group entitled to vote separately on the amend	
"The number of votes east for the ame	ndment(s) was/were sufficient for approval	
by		
(vot	ing group)	
	17, 2022 ident or other officer – if directors or officers ha	
selected, by an inco appointed fiduciary	orporator – if in the hands of a receiver, trustee, by that fiduciary)	or other court
	Yamilec Castellanos	
	Typed or printed name of person signing)	
	President	
	Title of person signing)	