

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

900003428349--0

-10/18/00--01019--015

*****78.75 *****78.75

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. CARE PEST MANAGEMENT, INC.

(Corporation Name)

(Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00

☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
RECEIVED
00 OCT 9 PM 4:22
00 OCT 18 AM 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

October 18, 2000

LAZARUS

MIAM, FL

SUBJECT: CARE PEST MANAGEMENT, INC.
Ref. Number: W00000025165

We have received your document for CARE PEST MANAGEMENT, INC..
However, the document has not been filed and is being returned for the following:

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole
Corporate Specialist

Letter Number: 100A00054659

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

00 OCT 19 PM 3:49

NOT RETURNED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
00 OCT 19 PM 4:22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

The Undersigned, acting as incorporator of a corporation, under the Florida General Corporation Act., adopts the following Articles of Incorporation of such Corporation.

ARTICLE I

The name of the Corporation is CARE PEST MANAGEMENT, INC.

ARTICLE II

The date of commencement of corporation existence is the 19 day of OCTOBER 2000

ARTICLE III

The purpose of the Corporation is to engage in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV

The Corporation shall have the authority to issue 100 shares, all in one class \$1.00 value.

ARTICLE V

The Address of its Registered Office is 10441 NW 28 ST #103A MIAMI, FL 33172. This is the Principal Office of the Corporation, and the name of its initial Registered Agent (s) (is) (are) PEDRO G FERNANDEZ JR.

ARTICLE VI

The number of Director (s) constituting its initial Board of Directors (is) (are) ONE (which) (whose) name (s) (is) (are) PRESIDENT PEDRO G FERNANDEZ JR.

ARTICLE VII

The name and address of the incorporator (s) (is) (are) PEDRO G FERNANDEZ JR 12725 SW 119 TERR MIAMI FL 33186.

ARTICLE VIII

Preemptive Rights shall be as follows: subject to the restrictions of the Florida General Corporation Act., the holders of the common stock of this corporation shall have preemptive rights to purchase at price, terms and conditions that shall be fixed by the Board of Directors, such of the shares of the stock of the corporation as may be issued for money or any property, or services from time to time, in addition to that stock authorized (and issued) by the Corporation.

The preemptive right of any holder is determined by the ratio of the authorized and issued shares of common stock held by the Holder to all shares of common stock currently authorized and issued.

DATED THIS 19 day of OCTOBER 2000.

X  _____
Signature

X _____
Signature

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF
PROCESS WITHIN THIS STATE: NAMING AGENT UPON PROCESS MAY BE SERVED: In
pursuance of Chapter 48.091 Florida Statutes, the following if submitted in compliance with said Act.

First CARE PEST MANAGEMENT, INC desiring to organize under the laws of the State of Florida with
its principal office as indicated in the Articles of Incorporation at the City of MIAMI County of Dade,
State of Florida, has named PEDRO G FERNANDEZ JR., located at 10441 NW 28 ST # 103A MIAMI
FL 33172 as its Agent to accept services of process within this State ACKNOWLEDGEMENT: Having
been named to accept, services of process for the above State Corporation, at place designated in this
Certificate: (I) (We) hereby accept, to act, in this capacity and agreed to comply with the provisions of
said Act., relative to keeping open Said Office.

X

RESIDENT AGENT

PEDRO G. FERNANDEZ JR.

FILED
00 OCT 19 PM 4:22
SECRETARY OF STATE
TALLAHASSEE FLORIDA