| T. | Palar | <u> </u> | 7865 | |
|---------|---|----------------------------------|--|--|
| ست ب | TRANSMITTAL LETTER | | | |
| - | Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | | |
| | SUBJECT: TSL Pest Contr | | 0000038524708 -03/14/0101052016 ******78.75 ******78.75 | |
| | | porate name - must i | nclude suffix) | |
| | Enclosed is an original incorporation and a check | and one (1) copy for: | of the articles of | |
| | | <u>\$ 78.75</u> | 01 SEC | |
| | | Filing Fee & Certificate | FILED MAR 14 AN IO: 1 AHASSEE, FLORID | |
| | FROM: | | | |
| | | or typed) | | |
| | | 3152 BAHIA AVENUE Address | | |
| | | HOLIDAY, FL 34690 City, State | | |
| | | (727)944-3752 | | |
| | | Daytime Teleph | one Number | |

NOTE: PLEASE PROVIDE THE ORIGINAL AND ONE COPY OF THE ARTICLES.

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ARTICLES OF INCORPORATION

01 MAR 14 AM 10: 42 SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

TSL Pest Control, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

_....

3152 Bahia Avenue HOLIDAY, FL 34690

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

TRACY LIVINGSTON 3152 BAHIA AVENUE HOLIDAY, FL 34690

ARTICLE V INCORPORATOR(S)

...

.. ._

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

.

TRACY LIVINGSTON 3152 BAHIA AVENUE HOLIDAY, FL 34690

ARTICLE VI INITIAL OFFICER(S) AND DIRECTOR(S)

TRACY LIVINGSTON DIRECTOR, PRESIDENT, VP, SEC., TREAS. 3152 BAHIA AVENUE HOLIDAY, FL 34690

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

| 9TH | day of March , 2001. | |
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CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: TSL PEST CONTROL, INC.

2. The name and address of the registered agent and office is:



Having been named as registered agent and to accept service of process for the above stated corporation 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 statues 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.

qnature Date