TRANSMITTAL LETTER

Department of State

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

SUBJECT: F	PestWorks LandCare, (PROPOSED CORPORA)	Inc. TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)	
Enclosed is an original	l and one(1) copy of the article	es of incorporation and a	10000424 -05/17/01 ******87.	131519 01127006 50 *****87.50
□ \$70.00	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	Heather Walker Name (Printed or typed) 508 Kellygreen Drive Address Orlando, FL 32828 City, State & Zip		ALLAHASSEE, FI	TILED M. 40
	(407) 384-319	3		

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

FILED

01 MAY 17 AM 10: 40

PestWorks LandCare, Inc.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

508 Kellygreen Drive Orlando, FL 32828

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide Pest Control, Lawn Fertilization & Termite Control

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS DIRECTORS (optional)

The name(s) and address(es):

Heather Walker, President 508 Kellygreen Drive Orlando, FL 32828

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Heather Walker 508 Kellygreen Drive Orlando, FL 32828

<u>ARTICLE VII INCORPORATOR</u>

The name and address of the Incorporator is:

Heather Walker 508 Kellygreen Drive Orlando, FL 32828

(Alesther) (Osliner) Signature/Registered Agent	May 11, 200
Signature/Incorporator	Date 0