P01000093272

TRANSMITTAL LETTER

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

EFFECTIVE DATE:
10/01/01

800004604658--9
-09/21/01--01030--002
*****87.50 *****87.50

SUBJECT: AA Pied Piper Pest Control Inc
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

- ☐ $70.00 Filing Fee
- ☐ $78.75 Filing Fee & Certificate of Status
- ☐ $78.75 Filing Fee & Certified Copy
- ☑ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Susan P. Camaraire
Name (Printed or typed)

5600 SW 9 St
Address

Plantation Fl 33317
City, State & Zip

954 742 5121
Daytime Telephone number

FILED
01 SEP 21 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

9/24/01

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: AA Pied Piper Pest Control, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 6550 NW 20 St
Sunrise, Fl. 33313

EFFECTIVE DATE 10/01/01

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: service business for pest control

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Susan P Camaraire Pres
5600 SW 9 St
Plantation Fl 33317

Paul J. Camaraire, Dir
5600 SW 9 St
Plantation Fl 33317

ARTICLE VI REGISTERED AGENT

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

Susan P. Camaraire
5600 SW 9 St
Plantation, Fl 33317

ARTICLE VIII Date of Corp

Effective Date
October 1, 2001

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Susan P. Camaraire
5600 SW 9 St
Plantation, Fl 33317

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Susan P Camaraire
Signature/Registered Agent

9/20/01
Date

Susan P Camaraire
Signature/Incorporator

9/20/01
Date