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

200006038682--6 -06/26/02--01018--030 ******78.25 ******78.25

SUBJECT: PROFESSOR BUGZ PEST SOLUTIONS, INC.

Enclosed are an orig	inal and one (1) copy of the arti-	cles of incorporation and	l a check for:	_			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	of			
FROM: KATHIEEN G. M. LTON Name (Printed or typed)							
2144 SE Mendowbrook Rd.							
	Stuart, FL city,	34997 State & Zip		CRETARY LAHASSI	02 JUN 26		
-	772 ~ 223 ~ (Daytime Te	9616 elephone number		101 715 715	PH 2: 28		

 $\label{eq:NOTE:Please provide the original and one copy of the articles.}$

BM 6/26

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
The name of the corporation shall be: PROFESSOR BUZZ P	est Solutions, Inc.
	readowbrook Rd. -L 34997
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Rest Continuation is organized is: Rest Contin	ROL SERVICE BUSINESS
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): KATHIZEN G. MILTON - PRESIDEN 2144 SE MURDOW BROOK Rd. STUART, FL 34997	TAS O
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: KOTHEEN G. MI LTON 2144 SE MEADOW BROOK Rd, STUART, FL 34997 ARTICLE VII INCORPORATOR	FILED JUN 26 PM 2: 28 CRETARY OF STATE LAHASSIE, FLORIDA
The <u>name and address</u> of the Incorporator is: KOTHLEEN G. MILTON 2144 SE MeAdoWbrack Rd. Stuart FL 34997 **********************************	
Having been named as registered agent to accept service of process for the above stated concertificate, I am familiar with and accept the appointment as registered agent and agree to a Signature/Registered Agent	rporation at the place designated in this act in this capacity 6-12-02 Date
V	

Signature/Incorporator