

PO2000127857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

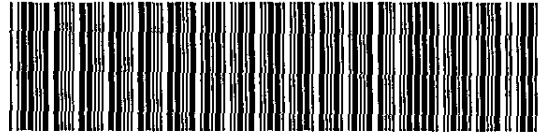
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRET  
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: Spot-Lite AAction Pest Control  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)  
SCORPORATION COMPANY

Enclosed is 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: Jamest, ~ Anna M. Cheers  
Name (Printed or typed)

273 TAYLOR HW. W. W  
Address

Port Charlotte, FL 33952  
City, State & Zip

941-625-6887  
Daytime Telephone number

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

Anna Cheers GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Article I, IV, VI  
DATE 12-4-02  
DOC. EXAM WJL

**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:

Spot-Lite ACTION Pest Control, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

273 TAYLOR LN. NW.  
Port Charlotte, Florida 33952

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To protect our personal assets.

**ARTICLE IV SHARES**

The number of shares of stock is:

5

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s) and address(es):

JAMES T. CHEARS & ANNA M. CHEARS  
273 TAYLOR LN  
PORT CHARLOTTE, FLORIDA 33952

**ARTICLE VI REGISTERED AGENT**

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

273 TAYLOR LN, NW. JAMES T. CHEARS & ANNA M. CHEARS  
PORT CHARLOTTE, FL 33952

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JAMES T. & ANNA M. CHEARS  
273 TAYLOR LN. NW.  
PORT CHARLOTTE, FL 33952

\*\*\*\*\*

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

James T. Chears & Anna M. Chears  
Signature/Registered Agent

11-25-02  
Date

James T. Chears & Anna M. Chears  
Signature/Incorporator

11-25-02  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 DEC -2 PM 4:28

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