

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000110781

**FILED**  
**May 23, 2013**  
**Secretary of State**

**Entity Name:** HOWELL EXTERMINATING CHEMICAL COMPANY INC.

**Current Principal Place of Business:**

21738 SR 20 E.  
BLOUNTSTOWN, FL 32424 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 326  
BLOUNTSTOWN, FL 32424 US

**New Mailing Address:**

**FEI Number:** 20-0532597

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NICHOLS, SCOTT  
19705 NW SR 73  
CLARKSVILLE, FL 32430 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** SCOTT NICHOLS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** NICHOLS, SCOTT  
**Address:** 19705 NW SR 73  
**City-St-Zip:** CLARKSVILLE, FL 32430

**Title:** VP  
**Name:** NICHOLS, SCOTT  
**Address:** 19705 NW SR 73  
**City-St-Zip:** CLARKSVILLE, FL 32430

**Title:** T  
**Name:** NICHOLS, SCOTT  
**Address:** 19705 NW SR 73  
**City-St-Zip:** CLARKSVILLE, FL 32430 US

**Title:** S  
**Name:** NICHOLS, SCOTT  
**Address:** 19705 NW SR 73  
**City-St-Zip:** CLARKSVILLE, FL 32430

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** SCOTT NICHOLS

P

05/23/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date