

P05000134200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

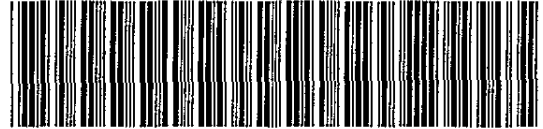
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/30/05--01015--008 **78.75

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05 SEP 30 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/2/05
BWC

COVER LETTER

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

SUBJECT: Reliable Pest & Termite Services, 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: Stephen James Rohal

Name (Printed or typed)

1503 Alabama Avenue

Address

St. Cloud, fl. 34769

City, State & Zip

407-460-4450

Daytime Telephone number

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

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:

Reliable Pest & Termite Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1503 Alabama Avenue

St.Cloud,Fl. 34769

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A for profit pest control services company

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Stephen James Rohal 1503 Alabama Avenue, St. Cloud,Fl. 34769 -President, V.P., Treasurer

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


Stephen James Rohal 1503 Alabama Avenue St. Cloud, Fl. 34769

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Stephen James Rohal 1503 Alabama Avenue St.Cloud, Fl. 34769

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

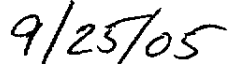


Signature/Registered Agent

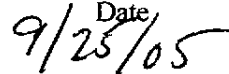


Signature/Incorporator

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Date



Date