

vision of Corporations

352 351 8054; Jun-19-07 10:22AM;

Page 1

Page 1 of 1

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000160948 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : DANIEL HICKS, P.A.

Account Number : 075061003325 Phone : (352)351-3353 Fax Number : (352)351-8054

FLORIDA PROFIT/NON PROFIT CORPORATION

PEST OPERATIONS, INC.

Certificate of Status	0
Certified Copy	U
Page Count	06
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

Help

KS

https://efile.sunbiz.org/scripts/efileovr.exe

6/19/2007

Sent By: Daniel Hicks, P.A.;

352 351 8054;

Jun-19-07 10:22AM;

Baye 2

(((H07000160948 3

)))

OF
PEST OPERATIONS, INC.

The undersigned incorporator, for the purpose of forming a corporation

the Florida Business Corporation act, does hereby adopt the first sof Incorporation: under the Florida Business Corporation act, does hereby adopt the following Articles of Incorporation:

NAME AND ADDRESS

The name of the Corporation shall be: PEST OPERATIONS, INC.

The address of the principal office of the Corporation is: 3132 Dothan Avenue, Spring Hill, Florida 34609, and the mailing address of the Corporation is: 3132 Dothan Avenue, Spring Hill, Florida 34609

ARTICLE II **DURATION**

This Corporation shall have perpetual existence.

ARTICLE III **BUSINESS, OBJECTS OR PURPOSE**

The general nature of the business to be transacted by this Corporation or the objects or purposes of the Corporation shall be as follows:

To engage in and transact any lawful business for which {((но7000160948 з }})

(((H07000160948 3

11)

corporation may be incorporated under the Florida Business Corporation Act and other incorporation laws of the State of Florida. No other purpose limits this general purpose in any way.

To do such other things as are incidental to the purposes of the
 Corporation or necessary or desirable in order to accomplish them.

ARTICLE IV AUTHORIZED SHARES

The aggregate number of shares which the Corporation is authorized to issue is 100 shares of common stock. Such shares shall be of a single class and shall have a par value of \$.01 per share.

ARTICLE V INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Corporation is:

3132 Dothan Avenue, Spring Hill, Florida 34609, and the name of the initial Registered Agent at that address is: JOHN M. BUTLER.

ARTICLE VI INITIAL BOARD OF DIRECTORS

The number of Directors constituting the initial Board of Directors is One

(1). The number of Directors may be increased or decreased from time to time in accordance with the Bylaws but shall never be less than one. The initial Board of Directors is as follows:

(((H07000160948 3

(((H07000160948 3)))

JOHN M. BUTLER - PRESIDENT/SECRETARY/DIRECTOR

ARTICLE VII INCORPORATORS

The name and address of the incorporator is as follows: John M. Butler, 3132 Dothan Avenue, Spring Hill, Florida 34609. The power of the Incorporator shall terminate upon the filling of the Articles of Incorporation of PEST OPERATIONS, INC., with the office of the Secretary of State of Florida.

ARTICLE VIII AMENDMENT

The Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation or any amendment to them, and any right conferred upon the Shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned has signed these Articles of incorporation on this 19 day of June, 2007.

John M. Butler, Incorporator

STATE OF FLORIDA COUNTY OF MARION

Before me personally appeared John M. Butler, to me well known and known to me to be the person described in and who executed the foregoing Articles of Incorporation and acknowledged to and before me that he executed

(((но7000160948 з

}}}

said instrument for the purposes therein expressed, and that he is personally known to me or produced F- Orivers License as identificated WITNESS my hand and official seal this 19 day of June, 2007. ___ as identification.

NOTARY PUBLIC-STATE OF FLORIDA Tina Dotson
Commission # DD518120
Expires: FEB. 14, 2010
Ronded Thru Atlantic Bonding Co., Inc. Notary Public, State of Florida My Commission expires:

(((Н07000160948 3

)))

ACCEPTANCE BY DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

I, the undersigned person, having been named as registered agent and to accept service of process for the above-stated Corporation at the place designated in this statement, hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

John M. Butler John M. Butler

Date: June 19, 2007.

DIVISION OF CORPORALISM