

P09000089635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

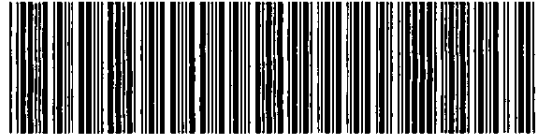
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/27/10--01019--001 **35.00

Amend

FILED

10 FEB -5 PM 4: 09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED FEB 05 2010



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2010

DEBRA BINGHAM
BINGHAM'S PROFESSIONAL TERMITE AND PEST
1020 49TH STREET S
ST PETERSBURG, FL 33707

SUBJECT: BINGHAM'S PROFESSIONAL TERMITE AND PEST CONTROL
SERVICES, INC.
Ref. Number: P09000089635

We have received your document for BINGHAM'S PROFESSIONAL TERMITE
AND PEST CONTROL SERVICES, INC. and your check(s) totaling \$35.00.
However, the enclosed document has not been filed and is being returned for the
following correction(s):

It appears that you completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or
your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call
(850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 010A00002404

REC-1ED
2010 FEB -5 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Bingham's Professional Termite & Pest Control Services, Inc.

DOCUMENT NUMBER: P09000089635

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Debra Bingham
Name of Contact Person

Bingham's Professional
Firm/ Company

1020 49 Street South
Address

St Petersburg FL 33707
City/ State and Zip Code

Debby@Binghamtermite.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debra Bingham at (727) 323-8866
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed) |
|--|--|--|---|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation

of ^{AND}
Bingham's Professional Termite & Pest Control Services, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

PO9000089635

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the
abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation
name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

_____ (Florida street address)

_____, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Vice President of Human Relations	Robert B. Bingham	485 12 Avenue North St Petersburg FL 33701	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Vice President of Environmental Resources	Edwin J. Sprague	550 33 Avenue North St Petersburg FL 33704	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Vice President of Operations	Christopher J. Bingham	208 11 Avenue North St Petersburg FL 33701	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 11-1-09

Effective date if applicable: 11-1-09
(date of adoption is required)
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 2-3-10

Signature Debra A. Bingham
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Debra A. Bingham
(Typed or printed name of person signing)

Secretary
(Title of person signing)