

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H12000060124 3)))



H120000601243ABCQ

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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : ALLSTATE CORPORATE SERVICES CORP  
Account Number : 120040000031  
Phone : (800) 906-9220  
Fax Number : (800) 906-9880

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please\*\***

Email Address: \_\_\_\_\_

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
JB PEST MANAGEMENT CORP.**

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help



March 7, 2012

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

JB PEST MANAGEMENT CORP.  
C/O REGISTERED AGENT SOLUTIONS  
155 OFFICE PLAZA DRIVE, SUITE A  
TALLAHASSEE, FL 32301

SUBJECT: JB PEST MANAGEMENT CORP.  
REF: P12000020515

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The date of adoption of each amendment must be included in the document.

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) 245-6050.

Carol Mustain  
Regulatory Specialist II

FAX Aud. #: H12000060124  
Letter Number: 012A00008738

RECEIVED

12 MAR -7 AM 8:11

REGULATORY SPECIALIST II  
TALLAHASSEE, FLORIDA

(H12000060124 3)

Articles of Amendment  
to  
Articles of Incorporation  
of

JB PEST MANAGEMENT CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000020515

(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)

9529 FOX TROT LANE

BOCA RTON, FL 33433

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

**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*

FILED  
12 MAR -7 AM 10:52  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

(H120000601243)

**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)**

<b><u>Title</u></b>	<b><u>Name</u></b>	<b><u>Address</u></b>	<b><u>Type of Action</u></b>
<u>P</u>	<u>Yehoshua S. Herzig</u>	<u>9529 Fox Trot Lane</u> <u>Boca Raton, FL 33433</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MG</u>	<u>Jeffrey Kazan</u>	<u>9529 Fox Trot Lane</u> <u>Boca Raton, FL 33433</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MG</u>	<u>Barry Weiss</u>	<u>9529 Fox Trot Lane</u> <u>Boca Raton, FL 33433</u>	<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)**

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**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)**

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(H120000601243)

The date of each amendment(s) adoption: March 02, 2012  
(date of adoption is required)

Effective date if applicable: \_\_\_\_\_  
(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 03/02/2012

Signature \_\_\_\_\_

(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)

Yehoshua S. Herzig

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)