

P14000006511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

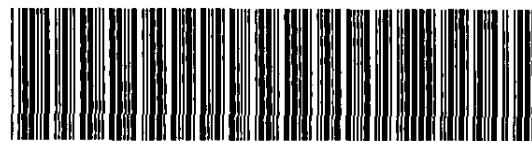
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: Tactical Pest Control , Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (!) copy of the articles of incorporation and a check for:

\$70.00 \$78.75
Filing Fee Filing Fee
 & Certificate of Status

\$78.75 \$87.50
Filing Fee Filing Fee,
 & Certified Copy Certified Copy
 & Certificate of & Certificate of
 Status Status

ADDITIONAL COPY REQUIRED

FROM: **Mitchell Frank**

Name (Printed or typed)

3313 SW 3rd Lane

Address

Cape Coral, Fl 33991

City, State & Zip

239-282-2340

Daytime Telephone number

frank120@bellsouth.net

E-mail Address: (to be used for future annual report notification)

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: Tactical Pest Control, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3313 S.W. 3rd Lane

Mailing address, if different is:

Cape Coral, FL 33991

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide pest control service for the interior and exterior of private homes, apartment complexes, condominiums/townhomes and commercial business'. Our corporation will also provide lawn and ornamental pest control for same. In addition, our corporation will provide inspections, and any termite treatments that are afforded under our license for same. All services provided, will be in accordance with Florida Laws and Florida Pest Control Industry Standards.

ARTICLE IV SHARES

The number of shares of stock is: One Hundred .

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mitchell Frank, Chief Executive Officer Name and Title: _____

Address 3313 S.W. 3rd Lane Address: _____
Cape Coral, FL 33991 _____

Name and Title: Barbara Frank ,President Name and Title: _____

Address 3313 S.W. 3rd Lane Address: _____
Cape Coral, FL 33991 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Mitchell Frank
 Address: 3313 S.W. 3rd Lane
Cape Coral, FL 33991

14 JAN 15 AM 10:40
 FLORIDA SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 A

ARTICLE VII INCORPORATORThe name and address of the incorporator is:

Name: Mitchell Frank
 Address: 3313 S.W. 3rd Lane
Cape Coral, FL 33991

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

Mitchell Frank
 Required Signature/Registered Agent

Jan. 06 , 2014

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Mitchell Frank
 Required Signature/Incorporator

Jan. 06 , 2014

Date