Pa3000011112

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGŁOBAL.COM

Account#: 120000000088

Date:	06/20/2023		
Name:	Merritt Wa	iker	<u> </u>
	2035		
			ROTHERS, INC.
			n to Transact Business
Amer	idment		
Chan	ge of Agent		
Reins	tatement		
Conve	ersion		
☐ Merge	er		
☐ Disso	lution/Withdrawal		
☐ Fictition	ous Name		
✓ Other	с	ERTIFIED CO	PY OF THE FILING EVIDENCE
Authorized A	.mount:	\$78.75	
Signature:		mw	

F: +852.2682.9790

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

<u> ARTICLE I NAMI</u>				
The name of the corpora	ation shall be: Pest Brothers, Inc.			_
ARTICLE II PRIN	CIPAL OFFICE Principal <u>street</u> address	N	Mailing address, if different is	r.
3564 West 94th St., Hi	alcah, FL, 33018			
				
ARTICLE III PURF The purpose for which	<u>OSE</u> the corporation is organized is: <u>any and all l</u>	awful business.		
			···	
ADTICLE IV CHAI	o E G			
ARTICLE IV SHAP The number of shares o				
		· 		
ARTICLE V INITI	AL OFFICERS AND/OR DIRECTORS			
Name and Tit	e:_Jose Antonio Rodriguez, Director, CEO	Name and Title;		
Address	6029 North Waterway Drive	Address:		<u>.</u>
	Miami, FL, 33155			
				
Name and Title	e: Michael Rodriguez, Director, COO	Name and Title:		
Address	5920 SW 6th St.	_ Address: _		
	Miami, FL., 33144	-		
			SEC!	2023
Name and Title	:	Name and Title:		
Address		_ Address:	7,70	CO Francis
		-	1774	
			71 - 11	. –

Name and	d Title:	Name and Title:	
Address		Address:	
			
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of	the registered save	ont is:
Name:	COGENCY GLOBAL, INC.	ine registeres age	
Address:	115 N. CALHOUN ST, STE. 4	•	
radicis,	TALLAHASSEE, FL 32301		
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		
The name and ad	ddress of the Incorporator is:		
Name:	Joshua Rice, Esq.	-	
Address:	3 E Evergreen Rd. Suite 101 PMB 836		
	New City, New York 10956	-	
Effective date, if (If an effective diling.) Note: If the date the document's e Having been name certificate, I am for the submit this document and the submit this document.	tother than the date of filing: Other than this block does not meet the applicable of file of the applicable of file of the other than the date of the other than the other than the facts stated herein are other than the facts stated herein are	t be more than f statutory filing re or the above stated ed agent and ugre true. I am aware	equirements, this date will not be listed as discorporation at the place designated in this see to act in this capacity 6/2s/20 = 3 Date 2 that the false information submitted in a
document to the I	Department of State constitutes a third degree felon	y as provided for i	n s.817.155, F.S.
Required Signatu	are/Incorporator		Date 06/20/2023
			FILED 2023 JUN 20 AM 1:24 SECRETARY OF STATE TALLAHASSEE, FL