## Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

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From:

Account Name : GM FINANCIAL GROUP LIMITED, INC.

Account Number : I19980000102 Phone : (954)428-8899 Fax Number : (954)428-6699

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## FLORIDA PROFIT/NON PROFIT CORPORATION **BDS TERMITE & PEST INC.**

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Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

LETIV SHARES 1000 her of shares of stock is:	<i>LE II PRINCIPA</i> Prin	LOFFICE cipal street address	ì	Mailing address, i	f different is:
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Name and	Title:	Name and Title:		
Address		Address:		
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ADDICULE IVE				
	EGISTERED AGENT orida street address (P.O. Box NOT acce	ptable) of the registered ager	nt is-	
Name:	BRYAN DAVID SHELEY,	<del>_</del>	-	
Address:	1610 NE 40 <sup>TH</sup> COURT	<del></del>		
	OAKLAND, FL 33334			
				1
ARTICLE VII I	<u>NCORPORATOR</u>			
The name and ad	dress of the Incorporator is:			
Name:	BRYAN DAVID SHELEY			
Address:	1610 NE 40 <sup>1H</sup> COURT			
	OAKLAND, FL 33334	<del></del>		
Effective date, if o	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific as	. (OF nd cannot be more than fi	PTIONAL) ive days prior	or 90 days after the
	inserted in this block does not meet the a fective date on the Department of State's		quirements, thi	s date will not be listed
Having been nam certificate, I am fa	ed as registered agent to accept service of miliar with and accept the appointment a	process for the above stated wregistered agent and agre	l corporation at e to act in this o	the place designated in capacity
BRYAN DAVID	SHELEY D.			2/1/23
	Required Signature/Registered A	gent	-	Date
I submit this doci document to the I	ument and affirm that the facts stated h Department of State constitutes a third deg	erein are true. I am aware eree felony as provided for i	that the false in s.817.155, F.S	information submitted i
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Required Signatul	re/Incorporator		Date <sup>-</sup>	16 - 7
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