P93000001582

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Rusiness Estitublems) |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer |
| Special Instructions to Filing Officer: |

Office Use Only



300299834563

UB 05 (1-81034--61) ++ 5.75

ALLABASSEL A LORIDA

JUN 1 3 2017 T. **Lemieux**



COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: ADVANTAGE PE | ST RELATED SERVICES | 5, INC. | | |
|---------------------------|--|--|---|--|--|
| DOCUMENT NUMB | | | | | |
| | f Amendment and fee are su | bmitted for filing. | | | |
| Please return all corresp | oondence concerning this mat | ter to the following: | | | |
| j | AMES T. NOONAN | | | | |
| - | · · · · · · · · · · · · · · · · · · · | Name of Contact Persor | 1 | | |
| | ADVANTGE PEST RELATED SERVICES, INC. | | | | |
| - | | Firm/ Company | | | |
| 1 | 2800 NW 22ND TERRACE | | | | |
| - | | Address | | | |
| 1 | POMPANO BEACH, FL 330 | 969 | | | |
| - | | City/ State and Zip Code | <u> </u> | | |
| GPAR | SONS@ADVANTAGEPES | Т,СОМ | | | |
| | E-mail address: (to be us | ed for future annual report | notification) | | |
| | | | | | |
| For further information | concerning this matter, pleas | e call: | | | |
| GINA PARSONS | | 954 at (| 275-3988 | | |
| Name o | f Contact Person | at (954) 275-3988 Area Code & Daytime Telephone Number | | | |
| Enclosed is a check for | the following amount made p | payable to the Florida Depa | rtment of State: | | |
| □ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | |
| Amer Divis P.O. | ing Address adment Section ion of Corporations Box 6327 hassec, FL 32314 | Amend Divisio Clifton | Address ment Section n of Corporations Building xecutive Center Circle | | |

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

| ADVANTAGE PEST RELATED SERVICE: | | |
|--|--|--|
| (Name of Co | orporation as currently filed with the Florida Dep | t. of State) |
| | (Document Number of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006 its Articles of Incorporation: | 6, Florida Statutes, this <i>Florida Profit Corporation</i> a | dopts the following amendment(s) |
| A. If amending name, enter the new name | of the corporation: | |
| name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association, | the word "corporation," "company," or "incorp n "Corp," "Inc," or "Co". A professional corpor " or the abbreviation "P.A." | The new orated" or the abbreviation ration name must contain the |
| B. Enter new principal office address, if an (Principal office address MUST BE A STRE | | |
| C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF | | |
| D. If amending the registered agent and/or new registered agent and/or the new registered agent and/or the new registered Agent | registered office address in Florida, enter the na gistered office address: | |
| | (Florida street address) | |
| New Registered Office Address: | (City) | _, Florida |
| New Registered Agent's Signature, if change I hereby accept the appointment as registered | ging Registered Agent: I agent.—I am familiar with and accept the obligation Signature of New Registered Agent, if changing | ns of the position. THE P 4: 28 |

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)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: X Change | <u> 5.1</u> | John Doc | |
|-------------------------------|-------------|-----------------|-------------------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | VP | JAMES A. NOONAN | 2741 NE 1ST STREET |
| XAdd | | | POMPANO BEACH, FL 33062 |
| Remove | | | |
| 2) Change | Т | GINA N. PARSONS | 15252 74TH STREET N |
| XAdd | | | LOXAHATCHEE, FL 33470 |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | _ | |
| Add | | | |
| Remove | | | |
| 5) Change | | <u> </u> | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| | heets, if necessary), | (Be specific) | | | | |
|------------------|-----------------------|------------------|-----------------|---|---------------------------------------|--------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | · · · - · · · · · · · · · · · · · · · · | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| · | | | | | | |
| | | | | | | |
| | | <u> </u> | | | | |
| | | | | | | |
| ·-· | | | | | | . |
| | | | | | | |
| · · · - | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| an amendment i | provides for an exc | hange reclassif | ication or canc | ellation of issued | l shares | |
| rovisions for im | plementing the amo | endment if not o | ontained in the | amendment itse | ·lf: | |
| (if not applica | ible, indicate N/A) | | | | | |
| | | | | | · · · · · · · · · · · · · · · · · · · | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| ··- | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| | MAY 26TH 2017 | |
|---|--|----------------------------|
| The date of each amendment(s) a date this document was signed. | aoption: | , if other than th |
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this bedocument's effective date on the De | plock does not meet the applicable statutory filing requirements, this dat partment of State's records. | e will not be listed as th |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were add by the shareholders was/were so | opted by the shareholders. The number of votes east for the amendment(s fficient for approval. |) |
| ☐ The amendment(s) was/were app must be separately provided for | proved by the shareholders through voting groups. The following statemed each voting group entitled to vote separately on the amendment(s): | nt |
| "The number of votes east | for the amendment(s) was/were sufficient for approval | |
| hy | (voting group) | |
| | (voting group) | |
| ☐ The amendment(s) was/were add action was not required. | opted by the board of directors without shareholder action and shareholder | - |
| ☐ The amendment(s) was/were add action was not required. | opted by the incorporators without shareholder action and shareholder | |
| MAY 26. Dated | 2017 | |
| Signature | Russ | |
| (By a d selecte | irector, president or other officer – if directors or officers have not been d. by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary) | |
| | JAMES T. NOONAN | |
| | (Typed or printed name of person signing) | · |
| | PRESIDENT | |
| | (Title of person signing) | |