

TRANSMITTAL LETTER

P95000009087

Department of State
Division of Corporations
P. O. Box 1000
Tallahassee, FL 32314

SUBJECT: NOVIES PEST MANAGEMENT INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee
Certified Copy
& Certificate

00001882875
-01/19/95--01008--010
***122.50 ***122.50

FROM:

WILLIAM C. NOVIES

Name (printed or typed)

16171 FOREST GLEN COURT

Address

PUNYA GORDA, FL 33982

City, State & Zip

813-637-3754 (OR) 624-8390

Daytime Telephone number

TALLAHASSEE, FLORIDA

95FEB-3 AM 8:48

FILED

LEAVE MESSAGE TO
CALL.

095-1518

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

January 23, 1995

WILLIAM C. NOYLES
16171 FOREST GLEN COURT
PUNTA GORDA, FL 33982

SUBJECT: NOYES PEST MANAGEMENT
Ref. Number: W95000001518

We have received your document for NOYES PEST MANAGEMENT and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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 (904) 487-6934.

Loria Poole
Corporate Specialist

Letter Number: 295A00002595

*I HAVE INCLUDED
AS REQUESTED*

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

WOMES PEST MANAGEMENT INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

WOMES PEST MANAGEMENT INC.
16171 FOREST GLEN COURT
PUNTA GORDA, FL 33982

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

50,000 SHARES OF COMMON STOCK
WITH PAR VALUE OF \$1.00 PER SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WILLIAM C. WOMES
16171 FOREST GLEN COURT
PUNTA GORDA, FL 33982

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55 FEB -3 AM 8:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to these Articles of Incorporation is(are):

(1) WILLIAM C NOYES
16171 FOREST GLEN COURT
PUNTA GORDA, FL. 33982

(2) EUNICE NOYES
16171 FOREST GLEN COURT
PUNTA GORDA, FL. 33982

ARTICLE VI

(1) PURPOSES OF CORPORATION
THE GENERAL PURPOSES FOR WHICH CORPORATION IS ORGANIZED ARE:
(A) TO ENGAGE IN THE BUSINESS OF PEST CONTROL AND MANAGEMENT;
(B) TO ENGAGE IN ANY OTHER TRADE OR BUSINESS CONNECTED WITH OR
ADJUNCTIVE TO THE FOREGOING BUSINESS;
(C) TO DO SUCH OTHER THINGS AS ARE INCIDENTAL OR DESIRABLE TO THE ABOVE.
The undersigned Incorporator(s) has(have) executed these Articles of Incorporation this

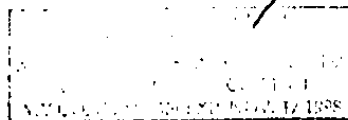
13 day of January, 19 95.

William C Noyes
Signature N200923443870

Eunice Noyes
Signature N200210453010

Signature

James H. Vaughn



Articles of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: WOYLES PEST MANAGEMENT INC.

2. The name and address of the registered agent and office is:

WILLIAM G. WOYLES
(Name)

16171 FOREST GLEN COURT
(P.O. Box not acceptable)

PUNTA GORDA, FL. 33982
(City/State/Zip)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

William G. Woyles
(Signature)

1-13-95
(Date)