# P95000959010

OFFICE USE ONLY

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# CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

Trademark

Other

1.			
•	ation Name)	(Document #)	
2. (Corpora	don Name)		
3. (Carpare	tion Name)	(Document #)	
4. (Corpora	tion Name)	(Document #)	
Walk in P	ick up time	Certified Copy	
Mail out	Vill wait Photocopy	Certificate of Status	
NEW FILINGS	AMENDMENTS		
Profit	Amendment		
NonProfit	Resignation of R.A., Officer/Dire	ector	
Limited Liability	Change of Registered Agent		
Domestication	Dissolution/Withdrawal		
Other	Merger		
OTHER FILINGS	REGISTRATION/		
Annual Report	QUALIFICATION		
Fictitious Name	Foreign		
Name Reservation	Limited Partnership	7. O	
	Reinstatement	F CHESSER JUL 3 1 1995	

CR2E031(10/92)

Examiner's Initials

#### Articles of Incorporation

of

THRIFTY PEST CONTROL, INC.

بر a corporation under the

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: THRIFTY PEST CONTROL, INC.

#### Article II - Principal Office

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

107 PINE TREE LANE

ALTAMONTE SPRINGS, FL. 32714

Article III - Shares

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

ONE THOUSAND (1,000) SHARES AT ONE HUNDRED (\$100.00) PER SHARE

# Article IV - Initial RogisteredAgent and StreetAddress

The name and address of the initial registered agent is:

WILLIAM A. NIELSEN

107 PINE TREE LANE

ALTAMONTE SPRINGS, FL. 32714

# Articlo V - Incorporator(s)

The name(s) and street address of the incorp Incorporation is(are):	orator(s) to these Articles of
RICHARD S. WILBUR 107 PINE TREE LANE ALTAMONTE SPRINGS, FL. 32714	WILLIAM A. NIELSEN 107 PINE TREE LANE ALTAMONTE SPRINGS, FL. 3271
The undersigned incorporator(s) has(have) exethis, Day of	cuted these Articles of Incorporation
, v	Signature (A / 100 C)
,	Signature
	Signature

### 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: THRIFTY PEST CONTROL,	INC.		
2. The name and address of the registered agent and office is:	THE SECR	_	
of the registered agent and office is:		•	
WILLIAM A MITTERIAL	(1)	$\simeq$	Г

WILLIAM A. NIELSEN
107 PINE TREE LANE
ALTAMONTE SPRINGS, FL. 32714

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.

Signature (A. F. Le D.

DATE