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Department of State Division of Corporations P. O. Box 6327 Tallahassae, FL 32314

700001748027 -03/19/95--01139--011 ****122.50 ****122.50

\$70.00 Filing Fas	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate / Required		
FROM:	JAMES J	. ANN ABE	ice m. u	IARK	ÉN
	3801 POL	MMBD DR.	·		
	VALRICO	h 3359	4	10-	
	(813)	y/State & Zip 653-1804 Telephone number		HALLAMASSEETTLORID	

PEST AUTHORITY INC.
(Proposed corporate name I must include suffix)

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

ARTICLES OF INCORPORATION

127 - 157 1 - 166 10 PH 2047

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

ARTICLE I NAME

The name of the corporation shall be:

PEST AUTHORITY, INC.

ARTICLE II PRINCIPAL OFFICE

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

PHYSICAL) 703 US. HWY 92 W. SEFFNER, PC 33584

PO BOX 3913 BRANDON 12 33509

(mailing

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

JAMES J. WARREN 3801 POLUMBO DR VALKICO, PL 33594

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

SECRETARY) - ANN (V. PRESIDENT)	MBELLE	M. WARREN	- 3801 VAL	POLUMBO DR. RICU, 12 33594	
(PRESIDEM)=JAMES	J.	WARREN	3801 VAL	POLUMBO DR. 1210, Fr. 33594	,

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

27 day of KEBKURHY, 19 96.

Ownfelle M. Warren Secretary, Use Relident Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:	PEST	AUTHOR ITY	IM.	
2.	The name and address of the regist	ered agent	and office is:	· · · · · · · · · · · · · · · · · · ·	
		(N	WARREN		:
	3801 (P.O. Box	LU MP	DE NOT ACCEPTABLE)		.
	VALR		73594 STATE/ZIP)		Fil 2: E7

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.