

**P96000045242**  
**TRANSMITTAL LETTER**

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

**FILED**  
**MAY 20 11 9:35**  
TALLAHASSEE, FLORIDA

SUBJECT: MIKE THE EXTERMINATOR INC.  
(Proposed corporate name - must include suffix)

200001832032  
-05/21/96--01066--015  
\*\*\*\*131.25 \*\*\*\*131.25

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

Additional Copy Required

FROM: MIKE J. COVELLI  
Name (printed or typed)

3419 SW 12 COURT  
Address

FT. LAUDERDALE FLA 33312  
City, State & Zip

954-584-9740  
Daytime Telephone number

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

D. BROWN MAY 29 1996

## 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:

MIKE THE EXTERMINATOR INC.

### ARTICLE II PRINCIPAL OFFICE

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

OFFICE: 4700 HIATUS RD  
SUITE 151A  
SUNRISE FL 33351

MAIL TO: 3419 SW 12 COURT  
FT. LAUDERDALE FL 33312

### ARTICLE III SHARES

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

ONE HUNDRED

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MIKE E. J. LOVELL  
3419 SW 12 COURT  
FT. LAUD. FL 33312

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**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):

MIKE J. COVELLI (pres.)  
3419 SW 12 COURT  
FT. LAUD. FLA 33312

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

16 day of MAY, 19 96.

(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**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**

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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: MIKE THE EXTERMINATOR INC.

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

MIKE J COVELLI  
(NAME)  
3419 SW 12 COURT  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)  
FT. LAUD. FLA 33312  
(CITY/STATE/ZIP)

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*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)

5/16/96  
(DATE)