P	7 D O O TRANSMITTA	D 30.	3 9 8 3	S FILED
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314				19. July 19. 19. 19. 19. 19. 19. 19. 19. 19. 19.
SUBJECT: Tara	4 Howard C. (Proposed corpora		100 Services 1000 31 335 104/03/97-017 ******70.00	
Enclosed is an original an	nd one(1) copy of the article	s 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 CO	PY REQUIRED	
FROM: HO	ward L. Cohe Name (Printer	i or typed)		
•••	734 Nu	50 Ave.		
	De bray Be	ech, FL 334	45-2122	

3 1447. P. Caracinecon

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

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:

Tara + Howard Cohen Pest Control Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

534 NW 50 Ale.

Delray Beach, Fl 33445-2722

ARTICLE III SHARES

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

100

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

Tara Cohen 534 NW 50 Ale. Delray Beach, FL 33445-2122

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):

Tara Cohen Howard L. Cohen 534 NW 50 Ave. Detray Beach, FL 33445-2122

The undersigned	d incorporator(s)	has(have)	executed these	Articles of 1	Incorporation this
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23 day of March, 19 97.

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

Houard 2. blassignature

Cimatan

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

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 Tara + Howard Cohen Pest Control
	Services, Inc.
2.	The name and address of the registered agent and office is:
	The name and address of the registered agent and office is: Tara Cohen (NAME)
	(NAME) 534 NW 50 Ave. (P. O. Box or Mail Drop Box NOT ACCEPTABLE)
	Delray Beach, FL 3345-2122

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.

Tara Cohen 3/23/97
(SIGNATURE) (DATE)