(SAMPLE LETTER OF TRANSMITTAL)

# Secretary of State-Division of Corporations

Division of Corporations P. O. Box 6327 Talahassee, FL 32314

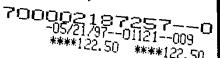
Re: KEYSTONE PEST CONTRO! # , Inc. (name of corporation)

### Gentlemen:

Enclosed please find the original and the copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and For for Registered Agent Designation for the above named corporation.

Very truly yours,



Susan & Comaraire (individual's name)

Keystone Pest Control Inc

2223 NW 64 Ave

Sunrise, Fl 33313



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 22, 1997

SUSAN P. CAMARAERE 2223 NW 64 AVENUE SUNRISE, FL 33313

SUBJECT: KEYSTONE PEST CONTROL, INC. Ref. Number: W97000012136

We have received your document for KEYSTONE PEST CONTROL, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

SIGNATURES MUST BE ORIGINAL. CHECK REGISTERED AGENTS SIGNATURE.

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 filling of your document, please call (904) 487-6933.

Letter Number: 397A00028061

Dana Calloway
Document Specialist

# ARTICLES OF INCORPORATION

KEYSTONE PEST CONTROL INC.
(name of corporation)
The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.
ARTICLE I - CORPORATE NAME
The name of the corporation is:  KEYSTONE PEST CONTRO! INC
ARTICLE II - DURATION
This corporation shall exist perpetually unless dissolved according to Florida law.
ARTICLE III - PURPOSE
The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the
United States and the State of Florida.
ARTICLE IV - CAPITAL STOCK
The corporation is authorized to issue One thousand shares (1000) of ONE
Dollar(s) (S / O ) par value Common Stock, which shall be designated "Common Shares."
ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT
The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:
NAME SUSAN P. Comaraire
ADDRESS 27.23 NW 64 AUE.
CITY SUNRISE FLORIDA ZIP 33313
The principal office, if known, or the mailing advess of the corporation is:
MAME SUSAN P Camaraire
ADDRESS ZZZ3 NW 64 AVE
277.7
THOMAN AIR COSTS
This corporation shall have $\frac{1}{10000000000000000000000000000000000$
NAME Susan P. Camaraire
ADDRESS 5600 5W 9 5t
CITY Plantation STATE FL DIE 33317
MAME Paul J. Camaraire
ADDRESS 5600 SW 95t
Dladd day
NAME RODULU L. Camaraire
ADDRESS 7888 DIXIE Beach Cir
CITY Tanacac Death CIV

# ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

The names and addresses o	the incorporators s	againg these Arti	ciez of meorbe	oration are as to	ollows:
NAME SUJUN	P Came	aroire			
ADDRESS 5600	5W 9 St				
ary Planta	tion		STATE F/		zie <i>333/7</i>
NAME Paul	J. Cama	iraire			
ADDRESS 5600	/				,
our Planta			STATE FI		zır33317
NAME Rona.	10 L. Car	narair	e		•
ADDRESS 7888	Dixie Bea	eh Cire	le		
crry Tama	rac		STATE FI		ZIP
IN WITNESS WHEREOF, to	<u> </u>	C		cles of Incorpora	
	_	Frens ()	land	nuaci uaii E	(Seal)
					(000.)
		Karalde	Leman	alla	(Seal)
STATE OF FLORIDA  COUNTY OF STOLE OF THE PROPERTY Public of appeared:		_			above, personally
Sugar Signature	marane	D F1V	rer Li	CENSE	<del></del>
Parer Thansignanire Percon Comas Signanire	aur	Dr.	ver L	ICENSE  ICENSE  of Identification	
known to me and known to be to me that <u>they</u> execonamed person S as indicated of	uted these Articles of It	ncorporation, that I	relied upon the	pomition, who action <u>S</u> ofidentifier	knowledged before ication of the above
SIDNEYE GE	IGER CC 567702			the County and St	nte last aforesaid this . 1977
EXPIRES SEP O	<b>IN</b> Ú	Printed Notary Signature	eye G	ziger	

# CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

### CERTIFICATE OF REGISTERED AGENT

**OF** 

KEYSTONE	PEST	CONTROL.	INC
,	(name of con	poration)	

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at	2223 NW 64 AUE
	SUNRISE, FI 33313
has named_	Susan P. Camaraire
located at th	e aforesaid address, as its Registered Agent to accept service of process

# **ACKNOWLEDGEMENT**

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

SECRETAIL PHIZ 2.

SECRETAIL HASSEE, FLORIDA

(registered agent)

within this state.