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(Business Entity Name)
(Document Number)
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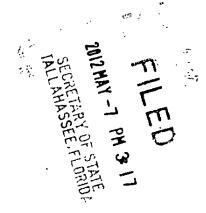




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DR 5/10/12

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

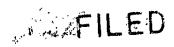
MAME OF CORPORATION: Wilhelm Pest Control, Inc.
OCUMENT NUMBER:
he enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
Robert Wilhelm Name of Contact Person
810 Services Inc.
86 Services, Inc.
2165 44th Terrace SW
Address
Naples Florida 34116 City/ State and Zip Code
City/ State and Zip Code
Wilhelmbugs Cool. com E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Robert Wilhelm at (239) 248-2088 Name of Contact Person Area Code & Daytime Telephone Number
The code a Day time Telephone Name
nclosed is a check for the following amount made payable to the Florida Department of State:
Sas Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation



•	of	
Wilhelm Pest Co	ntrol. Inc	2012 MAY -7 PM 3 17
(Name of Corporation as currently filed with the	Florida Dept. of State)	SECRETARY OF STATE
	ja 8,00	TALLAHASSEE.FLORIDA
(Document Number of Corporation		Ar [A]
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation	adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:		
86 Services Inc.		The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corpe	porated" or the abbreviation oration name must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		Terrace SW
	Maples, F	Torida 34116
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2165 44 TE	errace SW
	Naples, Flo	orida 34116
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		ame of the
Name of New Registered Agent NA		
2165 44th (Florida)	Terrace SW treet address)	
New Registered Office Address: Naples	, Floric	da 34/16 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familia. N A Signature of New Registered	nt: r with and accept the obligation I Agent, if changing	

	cer and/or l	Director being added:	N/A	e, anu
P = President; V = V	ice Presiden FO = Chief	Financial Officer. If a	e office title: cretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = n officer/director holds more than one title, list the first letter of each	
a change, Mike Jones	leaves the d		ntly John Doe is listed as the PST and Mike Jones is listed as the V. Th is named the V and S. These should be noted as John Doe, PT as a Ch	
Example: X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
I) Change Add Remove	-1,,,			
2) Change Add Remove		 		
3) Change Add Remove				
4) Change Add Remove				
5) Change Add Remove				
6) Change Add		-		

_ Remove

E. If amending or add (attach additional sh	neets, if necessary).	(Be specific)	ecisi nei e.		
N/A					
/					
					··· · · · · · · · · · · · · · · · · ·
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		, , , , , , , , , , , , , , , , , , , 		.	
. If an amendment poprovisions for imp (if not applicab	rovides for an excha lementing the amen le, indicate N/A)	ange, reclassific idment if not co	ation, or cancells ntained in the ar	ation of issued sha nendment itself:	ares,
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			· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) adoption: $\frac{5/2/\sqrt{2}}{2}$
1 1
Effective date if applicable: 5/3/12 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by" (voting group)
(voling group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 5/2/12
Signature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Robert MWilhelm
(Typed or printed name of person signing)
Pres,
(Title of person signing)