P9800037941

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

SUBJECT:	Professional Pest Management Of South Florida, inc.			
SUBJECT:	(Proposed corpor	ate name - must include sui	ffix)	-
			*****78.	[1][33][0]
Enclosed is an orig	final and one(1) copy of the articles	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	
FRON	A: Peter Bermudez Name (P	rinted or typed)		er .
	14011 Richwood Pl.	Address	SECRETA TALLAHAS	98 APR 2
	Davie, FL 33325 City,	State & Zip	ARY OF STATE ASSEE, FLORIDA	FILE (5) PR 24 PM 3: 45
	(954)370-1917		ATE ATE	ភ
	Daytime T	elephone number	-	

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

NAME ARTICLE I

The name of the corporation shall be:

Professional Pest Management Of South Florida, Inc.

PRINCIPAL OFFICE

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

14011 Richwood P1. Davie, FL 33325

SHARES ARTICLE III

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

100 Shares

INITIAL REGISTERED AGENT AND STREET ADDRI

The name and Florida street address of the initial registered agent are:

Peter Bermudez 14011 Richwood Pl. Davie, FL 33325

INCORPORATOR ARTICLE V

The name and address of the incorporator to these Articles of Incorporation are:

Peter Bermudez 14011 Richwood Pl. Davie, FL 33325

Signature/Incorporator

4/20/98

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

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/Registered Agent

4/20/98

Date