1915 South Florida Avenue Post Office Box 916 Lakeland, Florida 33802-0916

August 12, 2002

Telephone (863) 683-7596

Secretary of State Corporate Records The Capitol Tallahassee, Florida 32304

400007113134--2 -08/14/02--01068--001 *****35.00 *****35.00

Re: C & W Supply, Inc.

Enclosed please find for filing the original and one copy of the Amendment To Articles of Incorporation of C & W Supply, Inc.

Also enclosed is check in the amount of \$35.00 to cover the filing fee.

Thank you for your assistance.

Sincerely yours,

Stephanie M. Miklarcie

Stephanie M. Miklavcic Secretary

enclosure ---

02 AUG 14 PM 3: 31

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TAIL AHASSEE, FLORIDA

PS/19/02

02 AUG 14 PM 3:31

AMENDMENT TO ARTICLES OF INCORPORATION
OF FALLAHASSE, FLORIDA

C & W SUPPLY, INC.

Pursuant to the Florida General Corporation Act (Chapter 607, Florida Statutes) and pursuant to the Articles of Incorporation and by-laws of C & W SUPPLY, INC., a Florida corporation, the said Articles are hereby amended as follows:

Article I is hereby struck and deleted in its entirety and replaced with the following new Article I:

NAME

The name of this incorporation is:

HAWKINS TERMITE AND PEST CONTROL, INC.

IN WITNESS WHEREOF, the undersigned shareholders and officers have hereunto set their hands and seals this 12th day of August , 2002, for the purpose of amending the Articles of Incorporation under the laws of the State of Florida, and hereby make, subscribe, acknowledge and file in the office of the Secretary of State and certify this Amendment and that the facts contained are true.

Carl C. Hawkins, President and Shareholder, Wanda L. Hawkins, Secretary-Treasurer and Shareholder

STATE OF FLORIDA COUNTY OF POLK

WE HEREBY CERTIFY that on this day, before me, a Notary Public, duly authorized in the State and County named above to take acknowledgements, personally appeared Carl C. Hawkins and Wanda L. Hawkins, to me well known to be the persons described in as the subscribers and who executed the foregoing Amended Articles of Incorporation as their voluntary acts and deeds and that the facts set forth herein are true and correct. (Said persons are personally known X or Showed ID ______).

Witness my hand and official seal in the county and state above this 12th day of August , 2002.

My commission expires:

Motary Public

George T. Coward
Notary Public - Printed Name

