

P99000027173

TRANSMITTAL LETTER

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

FILED
99 MAR 19 PM 4:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: ALTERNATIVE PEST CONTROL INC.
(Proposed corporate name - must include suffix)

800002812238--2
-03/19/99-01084--010
*****78.75 *****78.75

Enclosed is an original and one(1) copy of the articles 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 COPY REQUIRED

FROM: ALTERNATIVE PEST CONTROL
Name (Printed or typed)

6843 LARCHMONT AVE
Address

NEW PORT RICHEY, FL 34653
City, State & Zip

727-815-0177
Daytime Telephone number

SD
3/24

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

**ARTICLES OF INCORPORATION
OF
ALTERNATIVE PEST CONTROL, INC.**

I, the undersigned, make this certificate for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Article of Incorporation.

**ARTICLE I
NAME**

The name of the corporation shall be **ALTERNATIVE PEST CONTROL, INC.**

**ARTICLE II
PRINCIPAL OFFICE**

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

**6843 LARCHMONT AVENUE
NEW PORT RICHEY, FL 34653**

**ARTICLE III
SHARES**

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares non par value common stock.

**ARTICLE IV
INITIAL REGISTERED AGENT**

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

Pamela J. Zambon
6843 Larchmont Avenue
New Port Richey, FL 34653

**ARTICLE V
INCORPORATOR**

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

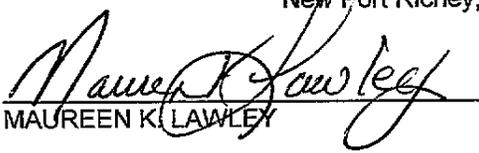
Pamela J. Zambon
6843 Larchmont Avenue
New Port Richey, FL 34653

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ARTICLE VI
INITIAL OFFICER

The name and address of the initial officers and number of shares of stock owned are:

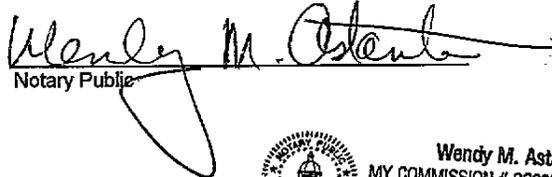
<u>NAME</u>	<u>ADDRESS</u>	<u>OFFICE</u>	<u>SHARES</u>
Maureen K. Lawley	6843 Larchmont Avenue New Port Richey, FL 34653	President	50
Pamela J. Zambon	6843 Larchmont Avenue New Port Richey, FL 34653	Secretary/Treasurer	50


MAUREEN K. LAWLEY


PAMELA J. ZAMBON

STATE OF FLORIDA
COUNTY OF PASCO

BEFORE ME, the undersigned authority, duly authorized to take acknowledgments, personally appeared Maureen K. Lawley and Pamela J. Zambon, to me well know to be the persons described in the foregoing Articles of Incorporation as the incorporator thereto and whom executed the foregoing Articles of Incorporation and they acknowledged before me that they subscribed to such Articles of Incorporation.
WITNESS my hand and seal this 4th day of February 1999, at New Port Richey, Pasco County, Florida.

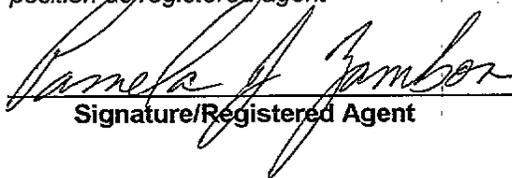

Notary Public

My Commission Expires
Seal/Stamp



Wendy M. Astarita
MY COMMISSION # CG602643 EXPIRES
January 3, 2001
BONDED THRU TROY FAH INSURANCE, INC.

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

2/4/99
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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