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A. RAMSEY JAN 07 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: WME Pest Manag	ement, Inc.	
DOCUMENT NUM	P000000 10 10 3		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	itter to the following:	
	Elsa Martin		
	,	Name of Contact Person	
		Firm/ Company	
	8400 Baymeadows Way Ste	12	
		Address	
	Jacksonville FL, 32256		
		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	emartin@turnerpest.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, plea	se call;	
Elsa Martin		at (760-7418
Name	of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	urtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amendi Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment Articles of Incorporation οf

FILED

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WME Pest Management, Inc.			
(Name)	of Corporation as curre	ntly filed with the Flori	ider Dept. of State) / Side
P9900040403			of allow Sei vine
-	(Document Numbe	r of Corporation (if know	wn)
Pursuant to the provisions of section 607. 1s Articles of Incorporation:	.1006, Florida Statutes, th	us <i>Florida Profit Corpo</i>	ration adopts the following amendment
. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered." "professional association."	'orp, " "Inc, " or "Co".	A professional corpor	porated" or the abbreviation "Corp.,"
Later now principal office address	if a policable.	N/A	
3. <u>Enter new principal office address,</u> Principal office address <u>MUST BE A S</u>			
			
L. Enter new mailing address, if appl	icable:		
(Mailing address MAY BE A POST)		N/A	
			
D. If amending the registered agent ar			the name of the
new registered agent and/or the new		ess:	
Name of New Registered Agent	Troy Fisher		
	8400 Baymeadows Way	: Ste 12	
	(Florida	street address)	
New Registered Office Address:	Jacksonville		. Florida 32256
A regular to office induces.		(Cîty)	(Zip Code)
		· · · · · · · · · · · · · · · · · · ·	114) X 314, Y
Kew Registered Agent's Signature, if c hereby accept the appointment as regist	hanging Registered Age	e <mark>nt:</mark> w with and accept the ob-	digations of the position
nevery accept the typominion da region		s with and acters the on	nigations of the position.
	A(X)		
	Signature of New	Registered Agent, if cha	anging
hack if applicable	V		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer director title by the first letter of the office title:

P = President; V - Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C - Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office held. President. Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

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>	<u>Name</u>	<u>Addres</u> s
1) Change	D	WISDO, THOMAS J	14507 CLIFTY COURT
Add			TAMPA, FL 33624
X Remove			
2) Change	D	LAMM, TIMOTHY	8400 Baymeadows Way Ste 12
X Add			Jacksonville FL, 32256
Remove 3) Change	D	MILLER, CYNTHIA R.	501 E. LEMON STREET
Add			TARPON SPRINGS, FL 34689
X Remove			
4) Change	S	MARTIN, ELSA	8400 Baymeadows Way Ste 12
X Add			Jacksonville FL, 32256
Remove			
5) Change	D	MILLER, FRANK A	501 E. LEMON STREET
Add			TARPON SPRINGS, FL 34689
X Remove			
6) Change	D	FISHER, TROY	8400 Baymeadows Way Ste 12
X Add			Jacksonville FL, 32256
Remove			

	ling additional Articl beets, if necessary),	(Be speciție)			
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f an amendment r	rovides for an excha	ngo rochssificatio	n ar cancallation o	fice and charm	
nrovisions for im	dementing the amend	lment if not conta	ined in the amendo	vent itself:	
(if not applica	He, indicate N.1)		THE THE WAY AND THE	Kiii Recita	
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The date of each amendment(s) date this document was signed.	афорнов:	if other than the
12	2/14/2021	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file da	nte)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirem Department of State's records.	eents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shar	reholder action and shareholder
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the sufficient for approval.	amendment(s)
	pproved by the shareholders through voting groups. <i>The folloor each voting group entitled to vote separately on the amendi</i>	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
select	director, president or other officer – if directors or officers ha ted, by an incorporator – if in the hands of a receiver, trustee, of inted fiduciary by that fiduciary)	
	Troy FSher (Typed or printed name of person signing)	

. . . .