## P9900002938340-3

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

SUBJECT: VAUGHAN and Son Pest Control Inc.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

□ \$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:

Name-(Printed or typed)

4068 Sunnise form RD
Address

middleburg

32068

City State & Zip

Daytime Telephone number

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

GONLINON CASE JEE 25

## 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.

The name of the corporation shall be: VAUGHAN and SON Pest Control In
The sold two control In
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:  4068 Sunnise Form RD,  Middleburg, FL. 32068
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100 shores-
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address of the initial registered agent are:  10hn Voughan 4068 Sunnise Fann RD
M. 131. 60088
ARTICLE V INCORPORATOR  The name and address of the incorporator to these Articles of Incorporation are:
John Voughan 4068 Sontise farm RD Middleburg, Fl-32068
7/20/99-
Signature/Incorporator Date
(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 Date