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LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305) 552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. EXTREME PEST CONTROL, INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-12/14/99--01055--005  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Examiner's Initials

RECEIVED  
99 DEC 14 AM 11:10  
FILED  
99 DEC 14 PM 12:28  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**FILED**  
99 DEC 14 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLES OF INCORPORATION**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE 1 NAME**

The name of the corporation shall be:

EXTREME PEST CONTROL INC.

**ARTICLE 11 PRINCIPAL OFFICE**

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

15002 SOUTH WEST 149 COURT MIAMI FL. 33187

**ARTICLE 111**

The number of shares of stock that this corporation authorized to have outstanding

At any one time is:

One hundred (100) .Par value of \$1.00./stock

**ARTICLE 1V**  
**INITIAL REGISTERED AGENT**

**The initial register agent is: GUILLERMO PORTUONDO**

**The initial register agent address is:**

**15002 SOUTH WEST 149 COURT MIAMI FL. 33187**

**ARTICLES OF INCORPORATION**

**ARTICLE V**

**INCORPORATORS (S)**

The name(s) and address (es) of the incorporator(s) to these articles of incorporation is (are):

**GUILLERMO PORTUONDO**

**ARTICLE VI DIRECTOR (S)**

The name and street address (es) of the director(s) to these Articles of Incorporation is/are. **Guillermo Portuondo**

**MIAMI 15002 SOUTH WEST 149 COURT FL 33187**

The undersigned incorporator(s) has/have, executed these Articles of Incorporation

**This: 13 day of : DECEMBER 1999**

  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**CERTIFICATE OF DESIGNATION**  
**REGISTER AGENT / REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, of the State of Florida

The Undersigned Corporation, organized under the Laws of the State of Florida, submits the following statement in designating the registered Office /registered agent in the State of Florida.

1- The name of the Corporation is:

EXTREME PEST CONTROL INC.

2. The name and address of the registered agent is.

**GUILLERMO PORTUONDO**

15002 SOUTH WEST 149 COURT

Address \_\_\_\_\_ (P.O BOX NOT ACCEPTABLE)

City, MIAMI State, FL. Zip Code, 33187

HAVING BEEN NAMED REGISTERED AGENT, I AGREE 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.

I AM FAMILIAR AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT. \_\_\_\_\_

SIGNATURE , \_\_\_\_\_

DATE, 12-13-99

**FILED**  
99 DEC 14 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA