PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED

(1)

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
1998 MAR -5 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S22014

1. Corporation Name

PAZITIVE PEST CONTROL, INC.

Principal Place of Business
5900 S.W. 47th St.
Miami, FL 33155

Mailing Address

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable: N/A
Suite, Apt. #, etc.
City & State
Zip / Country

3. New Mailing Address, If Applicable: N/A
Suite, Apt. #, etc.
City & State
Zip / Country

4. Date Incorporated or Qualified To Do Business In Florida: 12/28/90

5. FEI Number: 65-0235359 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional if you want a Certified Copy of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P/S/T/D	Alex Paz	5900 S.W. 47th St. Miami, FL 33155	Miami, FL 33155
			400002447754--5

REINSTATEMENT 92.280 $35.00

8. Name and Address of Current Registered Agent

Suzanne A. Dockerty, Esq.
J. PATRICK FITZGERALD, P.A.
110 Merrick Way, Suite #3-B
Coral Gables, FL 33134

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City | State FL | Zip Code

CR2E040 (1/97)

10. I, being appointed the registered agent of the above-named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: [signature] Date: 3-3-98
REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: X [signature] 3-4-98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

(2)

THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 729628 81624A

AUTHORIZATION : Patricia Pyjutt

COST LIMIT : $ 1658.75

ORDER DATE : March 5, 1998

ORDER TIME : 10:04 AM

ORDER NO. : 729628-005

CUSTOMER NO: 81624A 400002447754--5

CUSTOMER: Ms. Teri J. Dumas
J. Patrick Fitzgerald, Pa
Suite 3-b
110 Merrick Way
Coral Gables, FL 33134

DOMESTIC FILINGS

NAME: PAZITIVE PEST CONTROL, INC.

XX ___ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
XX _____ CERTIFICATE OF GOOD STANDING

RECEIVED
98 MAR -5 AM 10:42
DIVISION OF CORPORATION

CONTACT PERSON: Jeanine Glisar

EXAMINER'S INITIALS _____