I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SMITH, TAMMY G.

Electronic Signature of Signing Officer/Director Detail

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: MR. CARL'S PEST CONTROL, INC.

Name and Address of Current Registered Agent:

Current Principal Place of Business:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

SMITH, MICHAEL A. 3960 89TH ROAD, S.

Electronic Signature of Registered Agent

BOYNTON BEACH, FL 33436 US

Officer/Director Detail :

DOCUMENT# S91312

BOYNTON BEACH. FL 33436

Current Mailing Address:

FEI Number: 65-0298919

BOYNTON BEACH. FL 33436

3960 89TH ROAD, S.

3960 89TH ROAD, S.

Title	Р	Title	TS
Name	SMITH, MICHAEL A.	Name	SMITH, TAMMY G.
Address	3960 89TH ROAD, S.	Address	3960 89TH ROAD, S.
City-State-Zip:	BOYNTON BEACH FL 33436	City-State-Zip:	BOYNTON BEACH FL 33436

04/17/2014 TREASURY/SECRETARY

FILED Apr 17, 2014 Secretary of State CC9190065566

Date

Certificate of Status Desired: No