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COVER LETTER 4

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

SUBJECT: F18 HORNET Y	EST CONTROL, INC
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Richard Name	NAWES (Printed or typed)
P.O.	Boet 137674
CLER MONT	Flori DA 347/3 State & Zip
407-770- Daytime Te	3579 Elephone number
Fishorne Testicon E-mail address! (to be used	for future annual report notification)

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

Florida Department of State Divisions of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Gentlemen:

We are submitting the Articles of Dissolution for F18 Hornet Pest Control, Inc. document # P09000074908. I do not plan to revoke the dissolution of F18 Hornet Pest Control and release the name for immediate use for the filing of the enclosed articles of incorporation of F18 Hornet Pest Control, Inc.

If you have any questions, call me at 407 770 3579.

Thank you for your assistance.

Richard Navas

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SECREPARE OF STATE

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME	A Dest of The
The name of the corporation shall be: FIP HORA	SEL PEST CONTROL INC.
ARTICLE II PRINCIPAL OFFICE	
Principal <u>street</u> address	Mailing address, if different is:
17525 SILVER CLEEK Clermont, Floriba 3	
C/CCT total / Total ph. 3	TITLE CARROLL, TOOLER STATE
ARTICLE III PURPOSE	
The purpose for which the corporation is organized in	is:
All Lawful Business	TO THE PERSON NAMED IN COLUMN TO THE
•	See A Leading
ARTICLE IV SHARES	5 S
The number of shares of stock is: 100	>
ARTICLE V INITIAL OFFICERS AND/OF	R DIRECTORS
Name and Title: Richard NAVAS	, PResibeut Name and Title:
Address: 17525 SILVER CREEK CLERMONT, FLORIDI	n 2/12/1/
Name and Title	Name and Title:
Address:	Address:
	Name and Title:
Address:	
RTICLE VI REGISTERED AGENT	
he <u>name and Florida street address</u> (P.O. Box NOT	
Name: Richard NAVAS	5
Address: 17525 SILVER CRE CLERMONT F10	ek court as ha 34714
RTICLE VII INCORPORATOR ne name and address of the Incorporator is:	
Name: RICHARA NAVA.	5
Name: RICHARA NAVA: Address: 17525 51 LVER CA CLERHONE, FLORE	LEEK COURT
CLERHOW, 1-10Kg	<u> </u>
aving been named as registered agent to accept ser	rvice of process for the above stated corporation at the place designated
us certificate, I am familiar with and accept the appo	pintment as registered agent and agree to act in this capacity
	3/11/2011
Required Signature/Registe	ered Agent Date
Submit this document and affirm that the facts sta	ted herein are true. I am aware that the false information submitted in
submit this document and affirm that the facis state ocument to the Department of State-constitutes a thir	d degree felony as provided for in s.817.155, F.S.
. //	
	3/11/2011
Required Signature/Incom	rporator Date

Date