## Q1600000004

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
T. Militar		

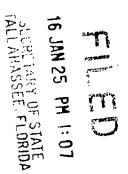
Office Use Only



300279403343

016-4

01/25/16--01024--008 \*\*87.50



JAN 27 2016 N. CAUSSEAUX

## DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR A NONRESIDENT RESTRICTED-USE PESTICIDE LICENSE

PARTI
1. Name and business address of nonresident: Aaron Peterson
AW Peterson INC. dbt Advantage Ag Air PO Box 26 Warren, Minnesota 56762
(COMPLETE EITHER #2 OR #3 - NOT BOTH)  2. The name and Florida street address of the registered agent upon whom service of process may be served in accordance with section 487.047, Florida Statutes is:
Having been named as registered agent upon whom service of process may be served on behalf of the undersigned, I hereby accept the appointment as registered agent and agree to act
Registered Agent's signature:  3. I, Aaron Potescolent, a nonresident, hereby appoint the Florida Secretary of State as my registered agent upon whom service of process may be served in accordance with section 487.047(2), Florida Statutes.  Nonresident's signature:  PART II
I hereby acknowledge this document is being submitted to designate a registered agent and a registered office pursuant to section 487.047. Florida Statutes  Nonresident's signature:  Date: 1/21/2016

FEES: \$35.00 - REGISTERED AGENT DESIGNATION FEE (REQUIRED)

\$52.50 - CERTIFIED COPY FEE (REQUIRED)

\$87.50 - TOTAL DUE

(MAKE CHECK PAYABLE TO: FLORIDA DEPT. OF STATE)

SUBMIT DOCUMENT AND CHECK TO: DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314

NOTE: CONFIRMATION OF FILING AND A CERTIFIED COPY WILL BE RETURNED TO THE FLORIDA DEPARTMENT OF AGRICULTURE & CONSUMER SERVICES.