## Q0400000017

(Requestor's Name)		
(Addr	ess)	<del></del>
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City	State/Zip/Phone	
(City)	otate/zip/Frione	(#)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nam	ne)
<b>(</b> = ===	· · · · · · · · · · · · · · · · · · ·	•
(Dace	iment Number)	
Certified Copies Certificates of Status		
Special Instructions to Fi	ling Officer	
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Office Use Only



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Power of Cetty

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FEB-86-2004 17:34

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

PART

Name and business address of nonresident:	
_ sprayux, inc Thadleus ) Rapera	
10500 Technology Drive PO Box.1577	
Cottondale, Al. 35453 Tuscaloosa, Al. 35453 (COMPLETE EITHER #2 OR #3 - NOT BOTH)	
(COMPLETE EITHER #2 OR #3 - NOT BOTH)	
2. The name and Florida street address of the registered agent upon whom service of processived in accordance with section 487.047, Florida Statutes is:	ess may be
, FL	
Having been named as registered agent upon whom service of process may be served on undersigned. I hereby accept the appointment as registered agent and agree to act in this	behalf of the capacity.
Registered Agent's signature:	<del></del> -
3. I. Thaddeus J. Kapers , a nonresident, hereby appoint the in Secretary of State as my registered agent upon whom service of process may be served in with section 487.047(2), Florida Statutes.  Nonrealdent's signature:	Florida n accordance
PART II	
FARTIL )	
I hereby acknowledge this document is being submitted to designate a registered agent ar office pursuant to section 487.047, Florida Statutes.	id a registered
Nonresident's signature:	
Date:	<del></del>
FEES: \$35.00 - REGISTERED AGENT DESIGNATION FEE (REQUIRED) \$52.50 - CERTIFIED COPY FEE (REQUIRED) \$67.50 - TOTAL DUE	0,
(MAKE CHECK PAYABLE TO; FLORIDA DEPT. OF STATE) SUBMIT DOCUMENT AND CHECK TO: DIVISION OF CORPORATIONS P.O. BOX 8327 TALLAHASSEE, FL 32314	FEB 16

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

INHSE 30 (6/92)

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