## Q0800000005

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
( <b>y</b>						
PICK-UP WAIT MAIL						
(Business Entity Name)						
•						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Special instructions to Filing Officer.						

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SECRETARY OF STATE
AND ANIASSEE FLORIDA

Power of atty Aubrey Lee Patrick

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

PARTI

		<del></del>	•			
1. Name and	business address o	f nonresident:		~		
(0,0	Rey Lee	DOTRICK	- (Inno	S111- 7	by P	(Ch. )
DO 6	30x 409	27	INDA	<u> </u>	107 CON	/KUZ
DIA:	SHUILLE		7204			
	SITUILLE	770 3	<u> </u>			
(COMPLETE	EITHER #2 <u>OR</u> #3	B - NOT BOTH)				
2. The name may be se	and Florida street a rved in accordance	ddress of the regi with section 487.0	stered agent upor 147, Florida Statul	n whom service les is:	ofprocessor Jan	
				<del></del>	- <u>22</u> ₹ <b>a</b>	; =
					<del>- []</del> -	
	named as registered				<u>-::::::::::::::::::::::::::::::::::</u>	: 0
3. I, Du Florida Secret in accordance Nonre	tered Agent's signal  A POST PARTY OF State as my n  with section 487.04  esident's signature:	egistered agent up 17(2), Florida Statu Duby	oon whom service ites.	of process ma	ay be served	
registered offic	owledge this docume ce pursuant to section	on 487,047, Florid	itted to designate a Statules.	a registered as	gent and a	
Nonre	esident's signature:	Much	y vai	run)		
	Date: _					
	\$87.50 - TOTA (MAKE CHECK PAY SUBMIT DOCU	FIFIED COPY FEE (R: AL DUE 'ABLE TO: FLORIDA L MENT AND CHECK TO:	EQUIRED) DEPT. OF STATE)	QUIRED)		
	<b>1</b>	DIVISION OF CORPORA 2.O. BOX 8327				
	1 7	TALLAMACORE EL 2024	1.4			

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