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N. CAUSSEAUX

JUN 17 2008

EXAMINER

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

PART I			
1. Name and business address of no		nos	
6445 NW 25+1	Street	2 mg 8	
Miami, FL =	33/22	聖皇卫	
(COMPLETE EITHER #2 <u>OR</u> #3 - NO	OT BOTH)	SSEE, IF B	
2. The name and Florida street address may be served in accordance with se			
	, FL.		
Having been named as registered ago behalf of the undersigned, I hereby ac in this capacity.			
Registered Agent's signature 3. I, HULY RUMDS Florida Secretary of State as my regis in accordance with section 487.047(2) Nonresident's signature:	, a nonresiden tered agent upon whom service	nt, hereby appoint the of process may be served	
I hereby acknowledge this document is registered office pursuant to section 4 Nonresident's signature:		a registered agent and a	
FEES: \$35.00 - REGISTER	RED AGENT DESIGNATION FEE (REC D COPY FEE (REQUIRED)	QUIRED)	
	ETO: FLORIDA DEPT. OF STATE)		
P.O. B	AND CHECK TO: ON OF CORPORATIONS OX 6327 HASSEE, FL 32314		

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