# Q0900000002

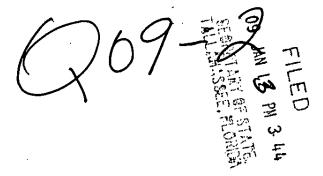
(Red	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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N. CAUSSEAUX

JAN 1 3 2009

**EXAMINER** 

09-2



## 'APOLINA FIRST

We take your banking personally.

### Facsimile

Date: 1/13/09

To: Unnette

Fax: 850-245-6030

From: Shelley DuBois
Telephone: 828 697-00 30

Fax: 328-696-1714

Re: Mr. Eric Case official check pyrut.

Total number of pages (including cover letter):

Munette -Please see pg. 2 . + 2 for the image of Mr. Case's check. Per n's request I am Living this - if you have duy questions I am more than happy to help.

Shelley DuBais (P) 828-697-0030 Carrina First Bank Wender romille, NC Fax Cover Sheet 1/13/2009

To-Florida Dept of State \* Attention - Nanette (850) 245-6030

From - Eric M Case 267 Andrews Rd Zirconia, NC 2879D (828)698-1586 Home (828)329-4819 cell

Subject - Designation of Regestired

Agent and Regestired office

For a Nonresident Restricted-use

pesticide License

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

#### PARTI

Name and business address of nonresident:		
Eric M Case	<b>3</b> 8 8	
267 Andrews Rd		<b>-</b> 1
Zicconia NC 28790	· (S) - F	_
	N ~ 60	η
(COMPLETE EITHER #2 <u>OR</u> #3 - NOT BOTH)		IJ
2. The name and Florida street address of the registered agent upon whom se may be served in accordance with section 487.047, Florida Statutes is:	rvige of process	ş
, FL.		
Having been named as registered agent upon whom service of process may be behalf of the undersigned, I hereby accept the appointment as registered agent in this capacity.		ct
Registered Agent's signature:		
3. I, <u>Fric M Case</u> , a nonresident, hereby Florida Secretary of State as my registered agent upon whom service of proces in accordance with section 487.047(2), Florida Statutes.	appoint the is may be serve	d
Nonresident's signature: Evic M Ca	, in	
PARTII		
I hereby acknowledge this document is being submitted to designate a registered registered office pursuant to section 487.047, Florida Statutes.	ed agent and a	
Nonresident's signature: Emi M Cana		
Date: 1-13-2009		
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.