## Q09000000041

(Requestor's Name)					
(Address)					
(Address)					
(/100/055)					
· (City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



800157454278

Q09-41

06/22/09--01029--020 \*\*87.50

Phillip Lynch Waters Jr

N. CAUSSEAUX JUN 3 0 2009

**EXAMINER** 



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

## PARTI

	business address of nor	nresident:		三角	9
	Inch Waters, Jr.			16.00	量而
	1 Waters, LLC			r. A. Jak	NE
Mobile, A	nda Street	<u> </u>		<u>- ಆಭಾಸ</u> ಕಣ್ಮುವ	2 [
•	EITHER #2 <u>OR</u> #3 - NO	T ROTH)		710	重り
(COMPLETE	LITTILK #2 <u>OK</u> #3 - NO	1 50111)			
		ss of the registered agent tion 487.047, Florida Stat		erviće of	process
			FL.		
	ındersigned, I hereby ac	ent upon whom service of people the appointment as re			
Regis	tered Agent's signature:				_
Florida Secret	ary of State as my regist with section 487.047(2)	tered agent upon whom so Florida Statutes.	esident, hereby ervice of proce	≀appoin ss may	t the be served
Nonre	esident's signature:	littes Dry	<u> </u>	igi in	<del></del>
		PART II	,	,**	
		s being submitted to desig 87.047, Florida Statutes	nate a register	red agei	nt and a
Nonre	esident's signature: <u>//</u>	Modra	<del>)</del>		
	Date: <u></u>	15/09			<del></del>
		RED AGENT DESIGNATION FE D COPY FEE ( <b>REQUIRED)</b> JE	Ē (REQUIRED)		
	(MAKE CHECK PAYABLE	TO: FLORIDA DEPT. OF STATE	<b>E</b> )		
	P.O. B	AND CHECK TO: ON OF CORPORATIONS OX 6327 HASSEE, FL 32314			

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