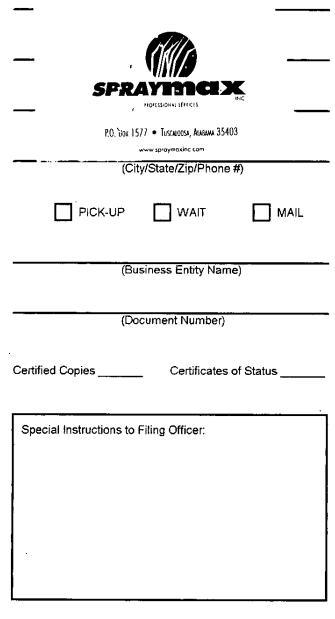
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Office Use Only



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N. CAUSSEAUX NOV 2 4 2009 EXAMINER

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

## PART I

Name and business address of nonresident:	
James E Cionan	•••
P. O. Box 1577	<u>)</u> .
Tuscaloosa, AL 35403	<u>ې</u>
COMPLETE EITHER #2 OR #3 - NOT BOTH)	# 11: Q
2. The name and Florida street address of the registered agent upon whom service of page may be served in accordance with section 487.047, Florida Statutes is:	şs 🕶
	_
, FL	_
Having been named as registered agent upon whom service of process may be served on behalf of the undersigned, I hereby accept the appointment as registered agent and agree to in this capacity.	act
Registered Agent's signature	
3. I, <u>James E. Cronan</u> , a nonresident, hereby appoint the Florida Secretary of State as my registered agent upon whom service of process may be servin accordance with section 487.047(2), Florida Statutes.	/ed
Nonresident's signature: E. Com-	
PARTII	
I hereby acknowledge this document is being submitted to designate a registered agent and a registered office pursuant to section 487.047, Florida Statutes.	9
Nonresident's signature: & . Com	
Date: 11/17/09	
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 ( AGRICULTURE & CONSUMER SERVICES.	OF.

INHSE30(6/92)