

Q 10 000 000 006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

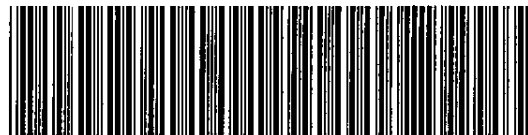
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

4

Office Use Only



900166968599

01/26/10--01020--018 \*\*350.00

Power of Atty

Eric Wisda ✓

Q10-6

FILED  
10 JAN 26 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. CAUSSEAU

JAN 28 2010

EXAMINER



**All Railroad Services Corp**  
159 Hampton Point Dr., Ste. 3  
St. Augustine, FL 32902-3056

Phone: 904-296-3434  
Fax: 904-296-3432  
Toll Free: 866-670-3434

To Whom It May Concern,

I have sent you <sup>4</sup> 3 employees that we would like to appoint the Florida Secretary Of State as our registered agent please. We'd like for you to send a copy of the DORA to the following address.

Kathleen M Osgood  
Environmental Manager  
Pesticide Certification Section  
Bureau of Compliance Monitoring  
Division of Agricultural Environmental Services  
Florida Department of Agriculture and Consumer Services  
3125 Conner Blvd., Bldg. 8 (L-29)  
Tallahassee, FL 32399-1650

Thank you,

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

**PART I**

1. Name and business address of nonresident:

Eric Wisda  
All Railroad Services  
159 Hampton Point Dr. Suite 3  
St Augustine FL 32092

FILED  
JAN 26 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**(COMPLETE EITHER #2 OR #3 - NOT BOTH)**

2. The name and Florida street address of the registered agent upon whom service of process may be served in accordance with section 487.047, Florida Statutes is:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_, 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 act in this capacity.*

Registered Agent's signature: \_\_\_\_\_

3. I, Eric Wisda, a nonresident, hereby appoint the Florida Secretary of State as my registered agent upon whom service of process may be served in accordance with section 487.047(2), Florida Statutes.

Nonresident's signature: Eric Wisda

**PART II**

*I hereby acknowledge this document is being submitted to designate a registered agent and a registered office pursuant to section 487.047, Florida Statutes.*

Nonresident's signature: Eric Wisda

Date: 1/14/10

**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.**