Q1000000001

(Re	equestor's Name)	
(Ac	ddress)	
•		
(Ac	ldress)	
,	,	
(0)	tulCtotol7in/Dlanc	
(CI	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
· (Bu	isiness Entity Nan	ne)
(, , ,	,
(Do	cument Number)	
	•	
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	
Opecial instructions to	Timig Officer.	
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O NAR 24 PH IZ: 3

G. HARVEY

MAR 2 4 2010

EXAMINER

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

PART I

	ousiness address of nonresident:		
Agron 1	Hayek ChemPro Services Ix.		
2953 BI	ienville BIVL #132	*****	
Ocen Sp	Tings Ms 39561/		
(COMPLETE E	ITHER #2 <u>OR</u> #3 - NOT BOTH)		
	and Florida street address of the registered agent upon whom ser yed in accordance with section 487.047, Florida Statutes is:	vice of p	rocess
	, FL		
	imed as registered agent upon whom service of process may be dersigned. I hereby accept the appointment as registered agent to		
Registe	ered Agent's signature:		
3. I, <u>Acco</u> Florida Secreta in accordance v	n have , a nonresident, hereby a ry of State as my registered agent upon whom service of process with section 487.047(2), Florida Statutes.	ppoint ti may be	he served
Nonres	sident's signature:		
	PART II		
	wledge this document is being submitted to designate a registere e pursuant to section 487.047, Florida Statutes.	d agent	and a
Nonres	sident's signature:	SEC	ö
	Date: 3/3/2010	AHA SET	ž <u>T</u>
F	EES: \$35.00 - REGISTERED AGENT DESIGNATION FEE (REQUIRED) \$52.50 - CERTIFIED COPY FEE (REQUIRED) \$87.50 - TOTAL DUE		LED
	(MAKE CHECK PAYABLE TO: FLORIDA DEPT. OF STATE)		∵
	SUBMIT DOCUMENT AND CHECK TO: DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314		ລ ິ

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