(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	state/Zip/Phon	ə #)
PICK-UP		MAIL
(Busin	ess Entity Nar	ne)
(Docu	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	
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Office Use Only



10-73

07/12/10--01059--004 \*\*1837.50

Martin Antonio

10 JUL 12 PH 1:55 TALLANASSEE, FLORIDA

N. CAUSSEAUX JUL 1 3 2010 EXAMINER DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR A NONRESIDENT RESTRICTED-USE PESTICIDE LICENSE

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PARTI	TA
1. Name and business address of nonresident:	
Martin Antonia	
PO BA 1120	
Marshall, AB 72650	<u>بالارتبار</u> مرتب
	ORII RII
(COMPLETE EITHER #2 <u>OR</u> #3 - NOT BOTH)	Dri
may be served in accordance with section 487.047, Florida Statute	·\$ IS:
, FL	
Having been named as registered agent upon whom service of proces behalf of the undersigned, I hereby accept the appointment as register in this capacity.	s may be served on red agent and agree to
<ul> <li>behalf of the undersigned, I hereby accept the appointment as register in this capacity.</li> <li>Registered Agent's signature:</li></ul>	red agent and agree to
behalf of the undersigned, I hereby accept the appointment as register in this capacity.	red agent and agree to
behalf of the undersigned, I hereby accept the appointment as register in this capacity. Registered Agent's signature:, a nonresident Florida Secretary of State as my registered agent upon whom service in accordance with section 487.047(2), Florida Statutes.	red agent and agree to
behalf of the undersigned, I hereby accept the appointment as register in this capacity. Registered Agent's signature:	red agent and agree to
behalf of the undersigned, I hereby accept the appointment as register in this capacity. Registered Agent's signature:, a nonresident Florida Secretary of State as my registered agent upon whom service in accordance with section 487.047(2), Florida Statutes.	red agent and agree to
behalf of the undersigned, I hereby accept the appointment as register in this capacity. Registered Agent's signature:	red agent and agree to t, hereby appoint the of process may be ser
behalf of the undersigned, I hereby accept the appointment as register in this capacity. Registered Agent's signature:, a nonresident Florida Secretary of State as my registered agent upon whom service in accordance with section 487.047(2), Florida Statutes. Nonresident's signature: PART II I hereby acknowledge this document is being submitted to designate a	red agent and agree to t, hereby appoint the of process may be ser
behalf of the undersigned, I hereby accept the appointment as register in this capacity. Registered Agent's signature:, a nonresident Florida Secretary of State as my registered agent upon whom service in accordance with section 487.047(2), Florida Statutes. Nonresident's signature: PART II I hereby acknowledge this document is being submitted to designate a registered office pursuant to section 487.047, Florida Statutes.	red agent and agree to t, hereby appoint the of process may be ser

(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.

INHSE30(6/92)