

		
(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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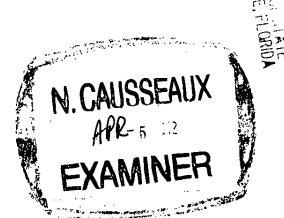
Office Use Only



200209813512

Q12-20,50

Jetson D. Taylor



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

12 APR 7
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registered office pursuant to section 487.047, Florida Statutes.

Nonresident's signature:

Date:

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