## 9/3000000082

(Requestor's Na	me)
(Address)	
(Address)	
(City/State/Zip/P	hone #)
(0.13), 0.101.07.21, p. 1.	,
PICK-UP WAIT	MAIL
(Business Entity	Name)
(Document Num	ber)
Certified Copies Certified	ates of Status
Special Instructions to Filing Officer:	•
, 	
,	

Office Use Only



400252544634

Kenneth Gurlinson

10/18/13--01016--006 \*\*87.50

013-82

FILED

13 OCT 18 PM 12: 30
SECRETARY OF STATE
SECRETARY OF STATE

PC

OCT 21 2013 N. CAUSSEAUX

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

PART I
1. Name and business address of nonresident:
KENNETH G. BURLINSON
661 UPPER RIDGE ROAD
BRIDGTON, ME 04009
(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 ac in this capacity.
Registered Agent's signature:
3. I, KENNETH G. BURLINSON, 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: Kennel S. Buren
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: <u>Serveck S. Burlin</u>
Date: 10-15-2013
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

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

TALLAHASSEE, FL 32314