@13000000090

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies		
Special Instructions to	Filing Officer:	
<u> </u>		

Office Use Only



000245558230 Bruce Miller

> 11/26/13 01021 026 175.00 87.50

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FILED

13 NOV 25 PM 12: 30

SECONDATE

SECONDATE

ALLAHASSEE, FLORIDA



NOV 26 2013 N. CAUSSEAUX

NOV 26 20.

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

PARTI

Name and business address of nonresident:
Bruce Miller Chem Pro Services Inc. 2953 Brenville Blud#132
Ocan Springs MS 39564
(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:
Sylvin Company
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 that in this capacity.
Registered Agent's signature:
3. I, Buce Miller, 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:
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:
Date: $\frac{11212013}{}$
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.