Q14000000093

(Requestor's Name)
· · ·
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sacross Enaily Harrie)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500265206635

Jadan Kneep

10/09/14--01007--020 **175.00

Q14-93



OCT 14 2014 N. CAUSSEAUX

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

PARTI	
1. Name and business address of nonresident:) 1
Hendrickson Flying Service, INC 21532 Quitno Rd. Rochelle, IL 61068	2
20) 2 Multho Rd. Rockelle, IL 61068	五 8
(COMPLETE EITHER #2 OR #3 - NOT BOTH)	<u>.</u>
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:	3S
, 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 in this capacity.	act
Registered Agent's signature:	
3. I, Jardan Kwepp , a nonresident, hereby appoint the Florida Secretary of State as my registered agent upon whom service of process may be servin accordance with section 487.047(2), Florida Statutes.	ved
Nonresident's signature:	
PART II	
I hereby acknowledge this document is being submitted to designate a registered agent and registered office pursuant to section 487,047, Florida Statutes.	a
Nonresident's signature: with frem	
Date: 10-6-14	
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.