

Q1500000055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

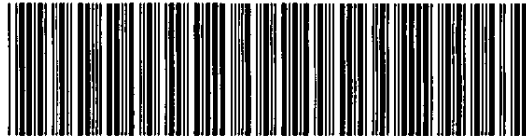
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FILED  
15 JUN 29 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 30 2015

N. CAUSSEAU

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

**PART I**

1. Name and business address of nonresident:

Matthew Garrett Parker  
117 Discovery Bay NW  
Milledgeville GA 31061

**(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:

Robin Parker  
3101 SE Chandelle Road  
Jupiter, FL 33478

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 act in this capacity.

Registered Agent's signature: Robin Parker

3. I, \_\_\_\_\_, 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: [Signature]

Date: 6/26/2015

**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.**

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