## Q1500000099

	(Requestor's Name)	
	(Address)	
	(Address)	
<del></del>	(City/State/Zip/Phone #)	
PICK-UF	P WAIT	MAIL
<del></del>	(Business Entity Name)	
	(Document Number)	<u></u>
Certified Copies	Certificates of S	Status
Special Instructions to Filing Officer:		
PICK-UF	(Business Entity Name)  (Document Number)  Certificates of S	

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PALLARY OF STATE
AND ANASSEE, FLORIDA

OCT 16 2015 N. CAUSSEAUX

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

PART I

Name and business address of nonresident:
Allen E. Woerner / Woerner Agribusiness  818 North McKenzie, Foley, AL. 36536
(COMPLETE EITHER #2 <u>OR</u> #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,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 act in this capacity.
Registered Agent's signature:
3. I, //er f. //errey , 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: 10/12/20/5
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.