

Q15000000102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

W15-72345

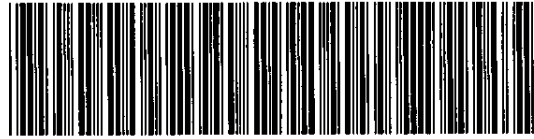
(Business Entity Name)

(Document Number)

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Q15-102

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15 NOV 13 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 17 2015
N. CAUSSEAU



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 3, 2015

CHAD T. SCOTT
1444 APPLEWOOD WAY
TALLAHASSEE, FL 32312

SUBJECT: CHAD THOMAS SCOTT
Ref. Number: W15000072345

We have received your document for CHAD THOMAS SCOTT and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Part I 1. and Part II of the application must be completed, see X's.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Nanette Causseaux
Regulatory Specialist II Supervisor

Letter Number: 515A00023196

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

PART I

1. Name and business address of nonresident:

Chad Scott
1444 Applewood Way Tallahassee, FL 32312

(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:

Golden Eagle Golf and Country Club, Inc.
3700 Golden Eagle Dr. E
Tallahassee, FL 32312

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: Chad D. Scott

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: Chad D. Scott

Date: 11/9/2015

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TALLAHASSEE, FLORIDA

**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.