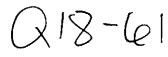
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☐ PICK-UP	☐ WAIT	MAIL
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Certified Copies Certificates of Status		
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N. CAUSSEAUX JUN 2 0 2018

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

PARTI

1. Name and business address of nonresident: Progressive Solutions LLC Del Martine2 Firmula 2
529 Industrial Drive
Bean Station, TN 37708
(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:
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 ac in this capacity.
Registered Agent's signature:
3. I, JOEL MARTINEZ (LERNANDEZ., 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: X
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: X
Date: <u>06 06 18</u>
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.