

Q1900000066

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

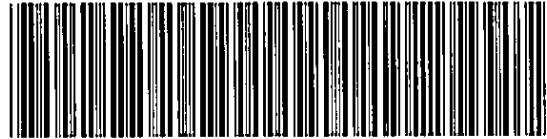
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W19000058244

Office Use Only



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SECRETARY OF STATE
HALLAMASSEEN PLAZA

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JUL 01 2019
M. SOLOMON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 20, 2019

ROBERT DIRK MERRILL
MERRILL AVIATION, INC
503 OLYMPIA DR.
DOTHAN, AL 36301

SUBJECT: ROBERT DIRK MERRILL
Ref. Number: W19000058244

We have received your document for ROBERT DIRK MERRILL and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Line item number 1 must be an Individual person's name. Cannot be the company. Please correct and return to my attention.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon
Regulatory Specialist II Supervisor

Letter Number: 719A00012429

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

PART I

1. Name and business address of nonresident:

~~Robert Dirk Merrill~~ Robert Dirk Merrill
503 Olympia Dr.
Dothan, Al 36301

(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:

_____, 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, Robert Dirk Merrill, 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: Robert Dirk Merrill

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: Robert Dirk Merrill

Date: 06-17-19

**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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