Q1900000067

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Doe	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:]

Office Use Only



700330389627

06/18/19--01012--028 **87.50

JUL 05 2019 M. SOLOMON

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

PARTI

1. Name and business address of nonresident: <u>Benjamin Wille:</u>	
1670 York Rd Gettysburg PA 17325	
(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: <u>Michael Page</u> <u>Clo Airglades Airport</u>	
1090 Airglades Blvd. Clewiston, FL 33440	
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: Mechal Hap	
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:	
PARTII	
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:	
FEES: \$35.00 - REGISTERED AGENT DESIGNATION FEE (REQUIRED) \$52.50 - CERTIFIED COPY FEE (REQUIRED) \$87.50 - TOTAL DUE	1-1-
(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.

INHSE30(6/92)



June 20, 2019

BENJAMIN MILLER C/O HELICOPTER APPLICATORS INC 1670 YORK RD GETTYSBURG, PA 17325

SUBJECT: BENJAMIN MILLER Ref. Number: W19000058417

We have received your document for BENJAMIN MILLER 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):

Please remove the c/o company's name from line item number 1 and return to our office..

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

Letter Number: 019A00012465

Mel Solomon
Regulatory Specialist II Supervisor

www.sunbiz.org