Q2100000025

(Re	questor's Name)	
(Ad	dress)	
(Ād	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Bu	isiness Entity Nan	ne)
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'JUN 18 2021 M. SOLOMON

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

1. Name and business address of normesident er nande Z 1. Name and business address of normesident er nande Z 1. Name and business address of normesident er nande Z	200 M
329 WOUSTRIAL DRIVE	
BEAN STATION, TN 37708	원(국) 기술: -
(COMPLETE EITHER #2 <u>OR</u> #3 - NOT BOTH) 2. The name and Florida street address of the registered agent upon whom service of	FIGURE COCCESS
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 behalf of the undersigned, I hereby accept the appointment as registered agent and agrin this capacity.	
Registered Agent's signature:	•
3. I. JOEL NORALES HELNAWSEZ, a nonresident, hereby appoint Florida Secretary of State as my registered agent upon whom service of process may be in accordance with section 487.047(2), Florida Statutes.	ê served
Nonresident's signature: Hoel Horales Hernandes	ر
PARTII	
I hereby acknowledge this document is being submitted to designate a registered agent registered office pursuant to section 487.047, Florida Statutes.	
Nonresident's signature: _oct Morales Hernandez	_
Nonresident's signature:oc/ Morales Hernandes Date: MAY Z4, Z0Z1	
FEES: \$35.00 - REGISTERED AGENT DESIGNATION FEE (REQUIRED) \$52.50 - CERTIFIED COPY FEE (REQUIRED) \$87.60 - 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.

INHSE30(6/92)