## 24000000028

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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500429179685

M. SOLOMON MAY 17 2024

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

## PART

: "

Name and business address of nonresident:     Prad Phillips - VFU, Inc:	
PO BOX 1074	<u> </u>
Ackerman, MS 39735	
(COMPLETE EITHER #2 <u>OR</u> #3 - NOT BOTH)	ASSEE
2. The name and Florida street address of the registered agent upon whom service of promay be served in accordance with section 487.047, Florida Statutes is:	
	<del></del>
Having been named as registered agent upon whom service of process may be served or behalf of the undersigned. I hereby accept the appointment as registered agent and agree in this capacity.	e to act
Registered Agent's signature:	
3. I, Brad Phillups , a nonresident, hereby appoint the Florida Secretary of State as my registered agent upon whom service of process may be in accordance with section 487.047(2), Florida Statutes.	e served
Nonresident's signature: Brown Philipp	
PARTII	
I hereby acknowledge this document is being submitted to designate a registered agent a registered office pursuant to section 487.047, Florida Statutes.	and a
Nonresident's signature: Brut Philips	
Date: 4.30.2024	
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.

INHSE30(8/92)