POWER OF ATTORNEY APPOINTING AN AGENT FOR SERVICE OF PROCESS UNDER THE TERMS OF THE MISSISSIPPI PESTICIDE LAW OF 1975 (SECTIONS 69-23-1 THROUGH 69-23-29, MISSISSIPPI CODE OF 1972).

whereas, the undersigned,	a pesticide reg	istrant of the state of	f,	
domiciled at			, conducting business as	
	at		, heretofore has or will	
(Company Name)	(Ad	ddress)		
register pesticides by the Bureau of Plan Mississippi under the provisions of the			at of Agriculture and Commerce, State of 5.	
Code of 1972, 69-23-1 through 69-23-	29, the undersi tary of State or	gned non-resident of a resident of Missis	sippi as its agent upon whom service of	
			the undersigned does hereby designate t)	
may be served in any action or legal properties. Mississippi of products subject to the responsible service upon the undersigned administrative agencies of the State of the undersigned, provided that a copy of the service upon the undersigned.	Mississippi Pes ss against it wh personally, and Mississippi, an	sticide Law of 1975 nich may be served d subject the unders nd shall be of the sa s is promptly sent b	; and said company does hereby upon said agent shall be deemed valid signed to the jurisdiction of the courts of me force and validity as if served upor	
		Sign	ature of Mathorized Registration	
		Type o	r Legibly Print Name of Person	
			Title	
COMPLETE THIS SECTION IF YO		DINTING SOMEOR	NE OTHER THAN THE SECRETAR	
	ACCEPTA	NCE BY AGENT		
The undersigned hereby accepts the abo	ove designation	and appointment as	s resident agent for service of process. A	
, MS, th	is the	day of	, 20	
Signature of Agent			Address	
Print or Type Name				

## Complete for Corporations, Partnerships & LLC's

STATE OF				
COUNTY OF				
Personally appeared before me, the unders	signed authority in and for the said county and sta	ate, on thisday		
of, 2, within my	y jurisdiction, the within named	······································		
who acknowledged that (he) (she) is	of	,		
a, and tl (Partnership, LLC or Corporation)	hat for and on behalf of the said	, and		
(Partnership, LLC or Corporation)	(Partnership, Ll	LC or Corporation)		
as its act and deed (he) (she) executed the above and	foregoing instrument, after first having been duly	authorized by said so		
(Partnership, LLC or Corporation) to do.				
rathership, EEC of Corporation)				
My Commission Expires:	Notary Public	Notary Public		
Affix official seal, if applicable)				
C	Complete for Individuals			
STATE OF				
COUNTY OF				
	IE, the undersigned authority in and for the said co	•		
day of , 2	2, within my jurisdiction, the within name	, within my jurisdiction, the within named		
, who acknowledged that (he	ne) (she) (they) executed the above and foregoing	instrument.		
	Notary Public			
My commission Expires:				
(A.CC:				
(Affix official seal, if applicable)				