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COVER LETTER

TO:

Registration Section

Division o	of Corporations		
	CHELL ECOLOGICAL RESEAR	.CH SERVICE LLC	
SUBJECT:	Name of I	Limited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are	submitted for filing.	
Please return all co	rrespondence concerning this mat	ter to the following:	
	SUSAN WALLS		
		Name of Person	
	MITCHELL ECOLOG	ICAL RESEARCH SERVICE LLC	
		Firm/Company	
	1015 SW MAPLETON	ST.	
		Address	
	FORT WHITE, FL 320	38	
		City/State and Zip Code	
	dr.susan.walls@gmail.cc E-mail addres	om s: (to be used for future annual report not	ification)
For further informa	ition concerning this matter, pleas	·	·
SUSAN WALLS		352 281-4700	
, \	Same of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check	t for the following amount:		
■ \$25.00 Filing I	Fee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing A Registra	.ddress: tion Section	<u>Street Address:</u> Registration Se	ection
Division	of Corporations	Division of Co	rporations
P.O. Boy Tallahas	c 6327 see, FL 32314	The Centre of 2415 N. Monro	l'allahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MITCHELL ECOLOGICAL RESEARCH SERVICE LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

		September 10, 2017	and assigned
The Articles of Organization for this Limited L	hability Company were filed o	on September 10, 2017	and assigned
Florida document number L07000092152	·		2
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of	f the limited liability compa	ny here:	
The new name must be distinguishable and contain the v	words "Limited Liability Company.	the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applie	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)	· ·	
		<u> </u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/or agent and/or the new registered office addre		our records, <u>enter the nar</u>	ne of the new registered
Name of New Registered Agent:	SUSAN WALLS		
New Registered Office Address:	1015 SW MAPLETON ST.		
	Ent	r Florida street address	
	FORT WHITE	Florida <u>3</u> 2	2038
	City		Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JOSEPH C. MITCHELL	1015 SW MAPLETON ST.	
		FORT WHITE, FL 32038	■Remove
			Change
MGR	SUSAN WALLS	1015 SW MAPLETON ST.	≣ Add
		FORT WHITE, FL 32038	□Remove
			Change
MGR	TANYA SHEWMAKE	12314 BOXFORD LN	
		MIDLOTHIAN, VA 23114	Remove
			Change
			
			□Remove
			□ Change
			□Remove
			Change
			□Remove
			□Сһап9е

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