5/11/2017



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COVER LETTER

Division of Co		•	
EHS Supp	oort Engineering, P.L.		
	Name of Lim	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Picase return all corresp	ondence concerning this matter	to the following:	
	Kimberly S. Frie		
	- 14 to - 16 to 4 to	Name of Person	of the der Skiggerbyrmannen up die bridde der 184 febr
	Cohen & Grigsby PC		
		Firm/Company	
	625 Liberry Ave	ı	•
		Address	
	Pittsburgh PA 15222		
		City/State and Zip Code	
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Name	of Person	Area Code Daytime Tele	Certified Copy
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EHS Support Engineering, P.L.	
(Name of the Limited Liability Comp (A Florida Limited	oany as it now appears on our records.) I Liability Company)
The Articles of Organization for this Limited Liability Compar Florida document number <u>L11000080733</u> This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Lial Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	bility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, enter the name of the new re:
Name of New Registered Agent:	
New Registered Office Address:	Emer Floridastreet address Florida
	Cin 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 fitle, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Kristin A. Vanlaudingham	5976 Thornton Lane	Add
-		Tattahassee, FL 32308	
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			☐ Change
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