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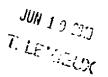
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FILED 2019 MAY 24 P & 28



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ECS-Florida, LLC	
Name of Foreign	Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are	e submitted for filing.
Please return all correspondence concerning this r	natter to the following:
Lisa M. Carlisle	
Name of Person	
Engineering Consulting Service	es, Ltd.
Firm/Company	
14026 Thunderbolt Place	
Address	
Suite 300	
City/State and Zip Code	
lcarlisle@ecslimited.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, pl	ease call:
Lisa Carlisle	571 , 299-6019
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount: \$\begin{align*}	\$55 Filing Fee & \$60 Filing Fee, Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

FILED

SECTION I (1-4 must be completed)

State: ECS-Florida, LLC Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address Must BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address May BE A POST OFFICE BOX) 2. The Florida document number of this limited liability company is: MO4000003289 3. Jurisdiction of its organization: Virginia 4. Date authorized to do business in Florida: 4. Date authorized to do business in Florida: (Mailing address Mo4000003289 5. New name of the limited liability company: (must contain "Limited Liability Company." "LLC." or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company." "LLC." or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company." "LLC." or "LLC.") (If name unavailable, enter alternate name adopted for includes on our records, enter the name of the new registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Agent: Signature, if changing Registered Agent: New Registered Agent's Signature, if changing Registered Agent out out in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and somplete performance of my daties, and I am familiar with and accept the obligations of my position as registered agent and provided for in Chapter 605. E.S. Or. If this document is being filed to merely reflect a change in the registered office address.		•
Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 2. The Florida document number of this limited liability company is: (Mailing address MAY BE A POST OFFICE BOX) 2. The Florida document number of this limited liability company is: (Miginia 4. Date authorized to do business in Florida: 08/13/2004 SECTION II (5-9 complete only the applicable changes) 5. New name of the limited liability company: (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.") 6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered diffice address here: Name of New Registered Agent: New Register	1. Name of limited liability Company as it appears	on the records of the Florida Department 2013 MAY 24 P 2 21
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liability company has been notified in writing of this change.	I hereby accept the appointment as registered agen the provisions of all statutes relative to the proper of and accept the obligations of my position as registe	nt and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with cred agent as provided for in Chapter 605, F.S. Or, if this in the registered office address. I hereby confirm that the limited

itle/ Capacity	<u>Name</u>	Address Type of A
/P	McLeer, Matt	2706 S. Ridgewood Avenue, Ste. 2, South Dayton, FL 32119
		R
resident	Champion, Jospeh	7064 Davis Creek Road, Jacksonville, Fl 32256
		R
resident	Sobh, Walid	2815 Directors Row, Suite 500, Orlando, Fl 32809
		= Re
IGR, VP	Horan, Terrence	2000 Avenue P, Suite 3, West Palm Beach, Fl 33404
_		Ad
		Ro

Typed or printed name of signee

Filing Fee: \$25.00