L250000 31643

(Requestor's Name)
(Address)
(Address)
, assess,
(O) (O) (G) (D) (O) (D)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
· · · · · · · · · · · · · · · · · · ·
Certified Copies Certificates of Status
Certified copies
Special Instructions to Filing Officer:
_
J. HORNE
FEB 2 1 2025
FED 2 1 2

Office Use Only



400442645274

2025 FEB 20 PH 1: 3025 FEB 20 PH 2: 37

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Nature's Native Environmental Service	es, LLC
Please Debit FCA000000003 For: 25	
Thank you Seth Neeley	
1461	Amerika Tila
- Holy	Art of Inc. File
	LTD Purtnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend, File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
,	Officer Search
	Fictitious Search
Staff	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by:	UCC For 3 File
20	UCC 11 Search
Name Date Tim	UCC 11 Retrieval
Walk-In Will Pick Up	·

COVER LETTER

TO: Registration Section Division of Corporations					
Nature's Native Environmental Services, LL SUBJECT:	.c				
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter	er to the following:				
Rauney Mitchell					
Name of Person					
Firm/Company	 -				
300 S. Daytona Avenue, Unit 1274					
Address					
Flagler Beach, FL 32136					
City/State and Zip Code					
naturesnativeservices@gmail.com					
E-mail address: (to be used for future annual rep	ort notification)				
For further information concerning this matter, please	call:				
Rauney Mitchell	256 665-5361				
Name of Person at (Area Code & Daytime Telephone Number				
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enclosed is a check for the following amoun	at:				
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				
INHS18 (2/14)					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Name of the limited liability company:	's Native Environmental Se	rvices, LLC
2. ((a)	(b)	
(Principal office address of limited liability co (Note: MUST BE STREET ADDRES.	mpany:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	9805 North Ocean Shore Blvd.	300 S	South Daytona Avenue, Unit 1274
	Palm Coast, FL 32137	Flagi	er Beach, FL 32136
	January 24, 2025	1.2500	0031643
3.	Date of filing/registration in Florida	a 4.	Document number
5. ((a) Rauney Mitchell		
J. (Registered Agent and Registered Office shown on the	records of the Florida Dept. o	of State:
	P		
	Registered Office Address (MUST BE FLORIDA	(STREET ADDRESS)	- · · cii
	9805 South Ocean Shore Blvd.		<u> </u>
	Palm Coast	, FL	2025 FEB 20
			-0
(1	(b)		
	Enter name of NEW Registered Agent and/or NEW	Registered Office address:	PH TO
	NEW Registered Office Address:		
	9805 North Ocean Shore Blvd.		
	Palm Coast	, FL	
agen was/	the limited liability company is not organized uno nge or changes are made, the Florida street address int will be identical. Or, in the case of a Florida is swere authorized by an affirmative vote of the marticles of organization or the operating agreeme	ess of the registered offic limited liability company nembers of the limited lia ent of the limited liability	the and the business office of the registered or, it is hereby confirmed that the change(s) ability company or as otherwise provided in
	Lan HA	RAUNEY	MITCHELL
Sig	gnature of a member or authorized representative of a men	nber	Printed or typed name of signee
the o	ereby accept the appointment as registered agen visions of all statutes relative to the proper and cobligations of my position as registered agent as merely reflect a change in the registered office actified in which go this charge.	it and agree to act in this complete performance of s provided for in Chapter ddress, I hereby confirm	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed that the limited liability company has been

 \star

*