H00003152

| | (Requestor's Name) |
|----------------------|--------------------------|
| | (Address) |
| | (Address) |
| | (City/State/Zip/Phone #) |
| PICK-UF | WAIT MAIL |
| | (Business Entity Name) |
| | (Document Number) |
| Certified Copies | Certificates of Status |
| Special Instructions | s to Filing Officer: |
| | J. HORNE |
| | MAR 2 2 2023 |
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

| | | ACCOUN | IT NO. | : I2 | 0000000 | 195 |
|--------|-------------|--|---------|----------|------------|---------|
| | | REFE | RENCE | _ | 3715 | 7167483 |
| | | AUTHORIZ | ATION | : SA | will | na la |
| | | COST | LIMIT | : \$ | 35.00 | |
| ORDER | DATE : | March 16, | 2023 | | | |
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| ORDER | NO. : | 593715-005 | | | | |
| CUSTO | MER NO: | 7167483 | | | | |
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| | | FOR | EIGN FI | LINGS | | |
| | NAME: | MANSCI | INC. | | | |
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| | | ΓΕ PARTNERSHI LIABILITY | | | | |
| | AMENDMEN' | | | | | |
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| PLEASI | E RETURN | THE FOLLOW | ING AS | PROOF | OF FIL | ING: |
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EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

COVER LETTER

| | ment Section Division of Corpora | tions | |
|---------------------|--|---|--------------------------------------|
| SUBJECT: Nam | e Amendment - Re-Submission | | |
| | Nan | ne of Corporation | |
| DOCUMENT N | UMBER: F10000003152 | | |
| The enclosed Am | endment and fee are submitted for | or filing. | |
| Please return all o | correspondence concerning this m | atter to the following: | |
| Jessica Buch | <i>y.</i> | | |
| **** | Name of Contact Person | | |
| MANTECH (US | | | |
| | Firm/Company | *************************************** | |
| 22676 Island Pinc | s Way, Unit 243 | | |
| | Address | | |
| Fort Myers Beach | , Fl. 33931 | | |
| | City/State and Zip Code | | |
| accounting@mant | ech-inc.com | | |
| E-mail addro | ess: (to be used for future annual r | eport notification) | |
| For further inform | ation concerning this matter, pleas | se call; | |
| Jessica Buch | e of Contact Person | +1-866 763-2122 | |
| Name | e of Contact Person | Area Code & Daytime | Telephone Number |
| | k for the following amount: | | |
| \$35 Filing Fee | ☐ \$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy | Certificate of Status Certified Copy |

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

| 152 | |
|--|--|
| Document number of corporation (if known) | . <u></u> |
| | 202 202 |
| ntion as it appears on the records of the Department | t of State) |
| 3 April 19, 2005 | |
| f) (Date authorized | to do business in Florida) |
| SECTION II | · · · · · · · · · · · · · · · · · · · |
| IPLETE ONLY THE APPLICABLE CHANGE | $\stackrel{?}{\simeq}$ (S) |
| oration, when was the change effected under the la | iws of its jurisdiction of |
| | |
| ding suffix "corporation," "company," or "incorpor | ated," or appropriate abbreviation, i |
| ernate corporate name adopted for the purpose of t | ransacting business in Florida) |
| iration, indicate new period of duration. | |
| | |
| (New duration) | |
| | |
| of incorporation, indicate new jurisdiction, | |
| | |
| (New jurisdiction) | ** ** ******** |
| | |
| stered office address in Florida, enter the name | of the |
| ed one address. | |
| | |
| (Florida street address) | . |
| • | |
| (City) , Flo | orida(Zip Code) |
| £ | (rap Cour) |
| ng Registered Agent: | |
| | Document number of corporation (if known) nion as it appears on the records of the Department 3. April 19, 2005 (Date authorized SECTION II IPLETE ONLY THE APPLICABLE CHANGE foration, when was the change effected under the laterate corporate name adopted for the purpose of the foration, indicate new period of duration. (New duration) of incorporation, indicate new jurisdiction. (New jurisdiction) stered office address in Florida, enter the name ed office address: |

Signature of New Registered Agent, if changing

| Title/ Capacity | <u>Name</u> | <u>Address</u> | Type of Action |
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| Attached is a certification to under the laws of w | | | ated not more than 90 days prior to delive istody of corporate records in the jurisdiction |
| | (Signature of a dire a receiver or other | etor, president or other officer - if in the court appointed fiduciary, by that fidu | ne hands of ciary) |
| Terysi (Typo | YCLC | Servick (Title | Operaturys Waracoc of person signing) |

FILING FEE \$35.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "MANSCI INC.", FILED A

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "MANTECH (USA)

INC." ON THE TWENTY-EIGHTH DAY OF JANUARY, A.D. 2021, AT 4:34

O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE

RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT

BUSINESS.



Authentication: 202957980

Date: 03-20-23