

F95 00000 4405

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000075717 3)))



H240000757173ABCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : COMPUTERSHARE
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)214-8442

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
BALL AEROSPACE & TECHNOLOGIES CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

FILED
2024 FEB 27 AM 8:45
TALLAHASSEE, FL

RECEIVED

2024 FEB 27 PM 3:33

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

al



February 26, 2024

FLORIDA DEPARTMENT OF STATE

Division of Corporations

BALL AEROSPACE & TECHNOLOGIES CORP.
P.O. BOX 9005-TAX DEPT
BROOMFIELD, CO 80021-0905US

SUBJECT: BALL AEROSPACE & TECHNOLOGIES CORP.
REF: F95000004405

2024 FEB 27 AM 8:45
TALLAHASSEE, FL

FILED

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline

Regulatory Specialist II Supervisor

FAX Aud. #: H24000075717

Letter Number: 524A00004205

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)

F95000004405

(Document number of corporation (if known))

1. BALL AEROSPACE & TECHNOLOGIES CORP.

(Name of corporation as it appears on the records of the Department of State)

2. DE

3. 09/12/1995

(Incorporated under laws of)

(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 02/23/2024

5. BAE Systems Space & Mission Systems Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

, Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

FILED
 2024 FEB 27 AM 8:45
 STATE
 TALLAHASSEE, FL

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
See attached			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2024 FEB 27 AM 8:45
 DEPT. OF STATE
 TALLAHASSEE FL

FILED

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Ariana Turoski
 (Typed or printed name of person signing)

Special Secretary
 (Title of person signing)

FILING FEE \$35.00

Changes to Officers:

Title	Name	Address	Change
DIRECTOR	KAUFMAN, DAVID	10 LONGS PEAK DR. BROOMFIELD, CO 80021	Remove Director title only
VP Secretary Director	BAKER, CHARLES E	9200 W 108th Circle Westminster, CO 80021	Remove
VP	MORRISON, SCOTT C	9200 W 108th Circle Westminster, CO 80021	Remove
VP	CAREY, NATE C	9200 W 108th Circle Westminster, CO 80021	Remove
VP	Wells, John H	9200 W 108th Circle Westminster, CO 80021	Remove
Director Chairman	FISHER, DANIEL	9200W 108th Circle Westminster, CO 80021	Remove
Treasurer	GOODWIN, DERON	9200W 108TH, CIRCLE Westminster, CO 80021	Remove
VP	FITZGERALD, AIDAN	10 LONGS PEAK DR BROOMFIELD, CO 80021	Remove VP title only

Current Officers/Directors list:

Director: Alice Eldridge

2941 Fairview Park Drive, #100, Falls Church, VA 22042

Director: Daniel Sallet

2941 Fairview Park Drive, #100, Falls Church, VA 22042

Assistant Treasurer: Kevin Sherfey

2941 Fairview Park Drive, #100, Falls Church, VA 22042

Assistant Secretary: Katherine Brown

2941 Fairview Park Drive, #100, Falls Church, VA 22042

Secretary: Pam Bartel

10 Longs Peak Drive, Broomfield, CO 80021

Treasurer: Aidan Fitzgerald

10 Longs Peak Drive, Broomfield, CO 80021

President: David Kaufman

10 Longs Peak Drive, Broomfield, CO 80021

2024 FEB 27 AM 8:45
FALLS CHURCH, VA
TALLAHASSEE, FL
Remove
Remove
Remove
Remove

FILED

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF DOCUMENT FILED

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office, the attached document is a true and complete copy of the

Statement of Change

with Document # 20241211987 of
BAE Systems Space & Mission Systems Inc.

Delaware Foreign Corporation

(Entity ID # 19951110356)

consisting of 2 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/22/2024 that have been posted, and by documents delivered to this office electronically through 02/23/2024@ 14:49:31.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 02/23/2024 @ 14:49:31 in accordance with applicable law. This certificate is assigned Confirmation Number 15779892



Jena Griswold

Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's website is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, <https://www.coloradosos.gov/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our website, <https://www.coloradosos.gov> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."



Colorado Secretary of State
Date and Time: 02/23/2024 10:36 AM
ID Number: 19951110356

Document must be filed electronically.
Paper documents are not accepted.
Fees & forms are subject to change.
For more information or to print copies
of filed documents, visit www.coloradosos.gov.

Document number: 20241211987
Amount Paid: \$10.00

ABOVE SPACE FOR OFFICE USE ONLY

Statement of Change Changing the Registered Agent Information

filed pursuant to § 7-90-305.5 and § 7-90-702 of the Colorado Revised Statutes (C.R.S.)

1. The entity ID number and the entity name, or, if the entity does not have an entity name, the true name are

Entity ID number 19951110356
(Colorado Secretary of State ID number)
Entity name or True name BAE Systems Space & Mission Systems Inc.

2. (If applicable, adopt the following statement by marking the box and enter all changes.)

☒ The registered agent name has changed.

Such name, as changed, is

Name
(if an individual) _____
(Last) (First) (Middle) (Suffix)
or
(if an entity) United Agent Group Inc.
(Caution: Do not provide both an individual and an entity name.)

(The following statement is adopted by marking the box.)

☒ The person appointed as registered agent has consented to being so appointed.

3. (If applicable, adopt the following statement by marking the box and enter all changes.)

☒ The registered agent address of the registered agent has changed.

Such address, as changed, is

Street address 155 E. Boardwalk #490
(Street number and name)
Fort Collins CO 80525
(City) (State) (ZIP Code)
Mailing address
(leave blank if same as street address) _____
(Street number and name or Post Office Box information)

(City) CO _____
(State) (ZIP Code)

4. (If applicable, adopt the following statement by marking the box.)

☒ The person appointed as registered agent has delivered notice of the change to the entity.

5. (If applicable, adopt the following statement by marking the box and include an attachment.)

☐ This document contains additional information as provided by law.

6. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document are _____
(mm/dd/yyyy hour:minute am/pm)

Notice:

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that such document is such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

7. The true name and mailing address of the individual causing this document to be delivered for filing are

<u>Turoski</u>	<u>Ariana</u>		
(Last)	(First)	(Middle)	(Suffix)
<u>801 US Highway 1</u>			
(Street number and name or Post Office Box information)			
<u>North Palm Beach</u>		<u>FL</u>	<u>33408</u>
(City)	(State)	(ZIP/Postal Code)	
<u>FL</u>	<u>United States</u>		
(Province - if applicable)	(Country)		

(If applicable, adopt the following statement by marking the box and include an attachment.)

☐ This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

Disclaimer:

This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form/cover sheet. Questions should be addressed to the user's legal, business or tax advisor(s).