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COVER LETTER

TO:	Registration S 'Division of Co				
SUBJE	CT.	TACTICAL CONTR	OLS ENGINEERING LLC		
SUBJE	CI:		ed Liability Company	·	
The enc	losed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please r	eturn all corresp	oondence concerning this matter	to the following:		
	JOHN PERKINS				
			Name of Person		
		TACTICAL C	ONTROLS ENGINEERING LL	C	
		+	Firm/Company	<u>-</u>	
			6615 SW 13TH ST		
			Address		
			W.EO. #1 \ E. E. 00000		
		GA	INESVILLE, FL. 32608 City/State and Zip Code		
			tce@tceusa.com		
		E-mail address: (to be used for future annual report notification)	
For furt	her information	concerning this matter, please of	all:		
JOHN PERKINS		HN PERKINS	at (352) 494	-0081	
	Name	of Person	Area Code & Daytime Tele	phone Number	
Enclose	ed is a check for	the following amount:			
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Regis Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314	STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center (Tallahassee, FL 32301	3	

ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION OF**

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TACTICAL CONTROLS ENGINEERING LLCALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company we		were filed on	6-27-07	and assigned
Florida document numberL0700006	67193		1	
This amendment is submitted to amend the fo	llowing:		•	
A. If amending name, enter the new name	of the limited liab	ility company here	• •	
TACTIO	CAL COMBAT E	ENGINEERING L	.LC	
The new name must be distinguishable and end w "L.L.C."	vith the words "Lim	ited Liability Compan	y," the designation "l	LC" or the abbrevi
Enter new principal offices address, if appl	icable:	TACTICAL CO	MBAT ENGINE	ERING LLC
(Principal office address MUST BE A STRE	ET ADDRESS)	6615 SW 13TH ST		
		GAINESVILLE	, FL. 32608	
(Malling addrson MAV DE A DOCT OFFIC)	E ROX)			
Mauing uduress MAT BE A POST OFFICE				
B. If amending the registered agent and registered agent and/or the new registered	l/or registered of office address her	<u>e</u> :	r records, enter t	he name of the
B. If amending the registered agent and	l/or registered of office address her JOHN K. Pl	e: ERKINS	r records, <u>enter t</u>	he name of the
B. If amending the registered agent and registered agent and/or the new registered	l/or registered of office address her	ERKINS 3TH ST		
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	l/or registered of office address her JOHN K. Pt 6615 SW 13	ERKINS TH ST Ente	r records, <u>enter t</u>	ress
	l/or registered of office address her JOHN K. Pt 6615 SW 13	ERKINS 3TH ST		ress

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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, shereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = 'Manager MGRM = Managing Member **Type of Action** Title Title Name | Address MGR WILLIAM C. HUTCHINS **6615 SW 13TH STREET** ☐ Add √ Remove GAINESVILLE, FL. 32608 ROMER A. SUTTON MGR **6615 SW 13TH STREET** Remove GAINESVILLE FL 32608 MGR STEPHEN REUSS <u>6615 SW 13TH STREET</u> Add Add GAINESVILLE, FL., 32608 Remove Remove \square Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary. JULY 5 2010 Dated ___ Signature of a member of authorized representative of a member JOHN K. PERKINS Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00