

8/25/22, 2:04 PM

Division of Corporations

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

# L22000188350

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 Division of Corporations  
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2022 AUG 25 PM 3:20

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
 TRAKKA USA DEFENCE LLC**

Certificate of Status	0
Certified Copy	1
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2022 AUG 25 PM 4:41  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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Electronic Filing Menu

Corporate Filing Menu

Help

AUG 26 2022  
 K. Brumbley

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Trakka USA Defence LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 20, 2022 and assigned
Florida document number L22000188350

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Trakka USA Defense LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices 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)

B. If amending the registered agent and/or registered office 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 Office Address:

Enter Florida street address

Florida

City

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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 605, F.S. Or, if this document is
being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability
company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
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