L23000498405

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TO:

Registration Section

Div	ision of Co	rporations		
	PAG Gove	rnment Contracting Group, LL	.C	
SUBJECT:		Name of Lin	nited Liability Company	
		Amendment and fee(s) are sub endence concerning this matter		
		Nelson Lamis		
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		PAG Government Contrac	eting Group, LLC	
		 	Firm/Company	2024 5 E C
		20900 NE 30th Avenue, 8	th Floor	
			Address	
		Aventura, FL 33180		2021 JAH 11 PH 2: 3
			City/State and Zip Code	2: 3
		admin@precisionaerospace	• •	71 -
		E-mail address: (to be used for future annual report not	fication)
For further in	formation c	oncerning this matter, please c	all:	
Nclson Lami	s		305 742-9524 at ()	
	Name o	f Person		e Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.O	ling Addressistration Sision of Co. Box 632 lahassee, F	Section orporations 7	Street Address: Registration Section of Core The Centre of Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PAG Government Contracting Group, LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
ne Articles of Organization for this Limited Liability Company v	were filed on 11/01/2023	and assigned
orida document number L23000498405		
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liabil	ity company here:	
AG Aerospace Contract Services Group, LLC		
e new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" o	r the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDRESS)		\$5004 JA
Method office was too meet be not keel not have		H2 与 13
nter new mailing address, if applicable:	<u> </u>	77
failing address MAY BE A POST OFFICE BOX)		77 79
		<u> </u>
If amending the registered agent and/or registered office adent and/or the new registered office address here:	ldress on our records, <u>enter the</u>	e name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	E. El .	
	Enter Florida street address	
	, Floric	
	City	Zip Code

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 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>	Address	Type of Action
			□Add
			ПRетюче
			□ Change
			□Add
			□Remove
		TAL	
			
			Remove
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			Change

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		21.00
		, i.i.
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ective date, if other than the effective date is listed, the date muster. If the date inserted in this blument's effective date on the D	t be specific and cannot be prior to date of filing or ock does not meet the applicable statutory fil	(optional) more than 90 days after filing.) Pursuant to 605.020' ling requirements, this date will not be listed as
cord specifies a delayed effectiv s filed.	e date, but not an effective time, at 12:01 a.m	n. on the earlier of: (b) The 90th day after the
cd	, 2024	