12/13/20, 11 42 AM

Division of Corporations

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

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LLC REGISTERED AGENT CHANGE PAE AVIATION AND TECHNICAL SERVICES LLC

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C. BRUMBLEY UEC 1 4 2022

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Τo;

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	me of the limited liability company: Pae Aviation And I	Technical So	ervices Ll	.C
	Principal office address of limited liability company:	,		failing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) Suite 200	Si	uite 200	(Note: MAY BE POST OFFICE BOX)
	MARLTON, NJ 08053	- –		V, NJ 08053
	7/14/2004			782
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Corporation Service Company			
	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat 1201 Hays Street Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2022 DEC SECRETE TALLA
	TALLAHASSEE,FL_3	32301		<u>ت</u> ت
(b)	C T Corporation System			REC.F
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u> <u>NEW Registered Office Address:</u>	271CC 43Q1 C3	2.	
	1200 South Pine Island Road			
	Plantation FL 3	33324		
the cha agent w was/we the arti	mited liability company is not organized under the lawsinge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liability reauthorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability.	s of the Sta he register pility comp the limited imited liab	ed office any, it is Hiability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Signat	ure of a member or authorized representative of a member			Printed or typed name of signee
I hereb provision the obli to mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change. Alfred Youna County Coun		this capu e of my c pter 605, rm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
Signatur	Morrage Assistant Secre	tary		
	Division of Corporations • P.O. Bo	ox 6327• T	Fallahas:	iee, FL 32314