#N10000	2004588
(Requestor's Name) (Address) (Address)	100263280791
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	DEPARTHENT OF STATE 14 SEP 29 PM 1: 54
Special Instructions to Filing Officer:	ZUILSEP 29 AN 10: 47 SUCINE IARY OF STATE FALL ANASSEE, FLORIDA

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K.SALY EXAMINER SEP 3 0 2014

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CSC.					•
CORPORATION SERVICE COMPANY	ACCOUNT NO.	:	12000000	0195	
	REFERENCE	:	317294	7571327	
	AUTHORIZATION	; (Lovello pt		
	COST LIMIT	:	\$ 25.00	enan	
ORDER DATE :	September 29, 20	14			
ORDER TIME :	12:57 PM				
ORDER NO. :	317294-005				
CUSTOMER NO:	7571327				
					

. ._

CHANGE OF AGENT

NAME: AERO PRECISION INDUSTRIES LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams

EXAMINER'S INITIALS:

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. Name of the limited liability company: AERO PRECISION INDUSTRIES LLC

2. (a)	201 Lindbergh Avenue	(1	»)	
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ 、		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Livermore C 94551		_	
		10/18/2010		M100000	004588
3.		Date of filing/registration in Florida	4.		Document number
5. (a)	BUSINESS FILINGS INCORPORATED			_
		Registered Agent and Registered Office shown on the records of th	ne Florida	Dept. of Stat	e:
		515 E. PARK AVENUE		····	_
		Registered Office Address (MUST BE FLORIDA STREET A)	<u>DDRESS</u>	2	
					_
		TALLAHASSEE, FL	32301		20
(t))	Corporation Service Company			17 11 SEP
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office add	<u>lress</u> :	ASSIST
		1201 Hays Street			
		NEW Registered Office Address:			EE FLORIN
		Tallahassee, FL	32301		- · · ·
the cl agent was/v	har tw we	mited liability company is not organized under the laws age or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cless of organization or the operating agreement of the li	he regis bility co the limi	tered office mpany, it is ited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
	_/	Jul	Johr	F. Kohler	
	_\	are of a member or authorized representative of a member		_	Printed or typed name of signee
provi the of to me	sic blig re	Accept the appointment as registered agent and agree ms of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	ortarma	nce of my l hapter 605 nfirm that	duties and I am familiar with and accept
Siona	ture	Unit August Companying Samily Companying		A	sst. Vice President
orgina			BY:		
		Division of Corporations• P.O. Bo FILING FEI			see, FL 32314

5. S. F. F.