## M10000041588

(Rec	questor's Name)
(Adc	dress)
(Add	dress)
(City	//State/Zip/Phone #)
	WAIT MAIL
(Bus	siness Entity Name)
(Doc	cument Number)
Certified Copies	Certificates of Status
Special Instructions to F	Filing Officer:
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	APR 2 2 2022
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## 700386090077

FILED 2022 APR 21 PH 5: 17 SECRETARY OF STATE SECRETARY OF STATE



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 630831 8006783

AUTHORIZATION :

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COST LIMIT : 

- ORDER DATE : April 20, 2022
- ORDER TIME : 12:51 PM
- ORDER NO. : 630831-005
- CUSTOMER NO: 8006783

## CHANGE OF AGENT

NAME: AERO PRECISION INDUSTRIES LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

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.

I. N	ame of the limited liability company:	SISION IND	USTRIES L	.LC		
	۱۰۰۰ ۱۰					
	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )	、		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	15501 SW 29TH STREET		200 N. P	ACIFIC COAST HWY STE 1350		
	MIRAMAR, FL 33027		EL SEGI	JNDO, CA 90245		
	10/18/2010		M1000000	04588		
3.	Date of filing/registration in Florida	4		Document number		
5. (a	)					
	Registered Agent and Registered Office shown on the records	s of the Florid	a Dept. of Sta	te:		
	CT CORPORATION SYSTEM		<u>- · ·</u>	_		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	1200 SOUTH PINE ISLAND ROAD			S N		
	PLANTATION	FL_33324		SECRETARY TALLAHAS		
(b)				TARY OF ST AHASSEE		
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	red Office at	<u>idress:</u>			
				SFE. FI		
	Corporation Service Company					
	<u>NEW</u> Registered Office Address:					
	1201 Hays Street			_		
	Tallahassee	FL		_		
chang agent was/w the ar	limited liability company is not organized under the e or changes are made, the Florida street address of t will be identical. Or. in the case of a Florida limited vere authorized by an affirmative vote of the member ticles of organization or the operating agreement of t	the register I liability co rs of the lin the limited	ed office ar ompany, it i aited liabilit liability cor	Id the business office of the registered s hereby confirmed that the change(s) ty company or as otherwise provided in npany. Drized Person		
the ob	ture of a member or authorized representative of a member by accept the appointment as registered agent and a sions of all statutes relative to the proper and comple- ligations of my position as registered agent as provi- rely reflect a change in the registered office address, ad in writing of this change.	agree to act vie perform ded for in ( 1 hereby c	t in this cap ance of my Chapter 60: onfirm that	Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been		

Signature of Registered Agent

Grace E. Kirby, Asst Vice President

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00

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