

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M01000000431

**Entity Name:** PAE APPLIED TECHNOLOGIES LLC**Current Principal Place of Business:**6500 WEST FREEWAY, SUITE 400  
FORT WORTH, TX 76116**Current Mailing Address:**6500 WEST FREEWAY, SUITE 400  
FORT WORTH, TX 76116 US**FEI Number: 54-1920428****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Authorized Person(s) Detail :**

Title	MANAGER
Name	PEIFFER, CHARLES
Address	6500 WEST FREEWAY, SUITE 400
City-State-Zip:	FORT WORTH TX 76116

Title	MANAGER
Name	COBB, PAUL W JR
Address	6500 WEST FREEWAY, SUITE 400
City-State-Zip:	FORT WORTH TX 76116

Title	MANAGER
Name	WILLIAMS, KARL
Address	6500 WEST FREEWAY, SUITE 400
City-State-Zip:	FORT WORTH TX 76116

Title	ASSISTANT SECRETARY
Name	FINN, STEPHANIE N
Address	1320 N COURTHOUSE ROAD, SUITE 800
City-State-Zip:	ARLINGTON VA 22201

Title	MEMBER
Name	DYNCORP LLC
Address	6500 WEST FREEWAY, SUITE 400
City-State-Zip:	FORT WORTH TX 76116

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: STEPHANIE N FINN****ASSISTANT SECRETARY 02/14/2018**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date