2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000001368

Entity Name: TAMPA MICROWAVE, LLC

Current Principal Place of Business:

11200 DR. MARTIN LUTHER KING JR. ST. N SUITE 103

ST. PETERSBURG, FL 33716

FILED
Apr 12, 2021
Secretary of State
1654783045CC

Current Mailing Address:

11200 DR. MARTIN LUTHER KING JR. ST. N

SUITE 103

ST. PETERSBURG, FL 33716 US

FEI Number: 45-4182446 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 Title MANAGER

Name E2G PARTNERS, LLC Name THALES DEFENSE & SECURITY, INC.

Address 11200 DR. MARTIN LUTHER KING JR. Address 22605 GATEWAY CENTER DRIVE

11200 DR. MARTIN LUTHER KING JR. Address 22605 GATEWAY CENTER DRIVE ST. N

SUITE 103 City-State-Zip: CLARKSBURG MD 20871

City-State-Zip: ST. PETERSBURG FL 33716 Title MANAGER

Title MANAGER Name GUERRAZZI, ERIC

Name SHEEHAN, MICHAEL Address 11200 DR. MARTIN LUTHER KING JR.

Address 22605 GATEWAY CENTER DRIVE ST. N
SUITE 103

City-State-Zip: CLARKSBURG MD 20871 City-State-Zip: ST. PETERSBURG FL 33716

TitleMANAGERTitleMANAGERNameJOHNSON, OBIENameMILLER, BRIAN

Address 11200 DR. MARTIN LUTHER KING JR. Address 22605 GATEWAY CENTER DRIVE

ST. N SUITE 103 City-State-Zip: CLARKSBURG MD 20871

City-State-Zip: ST. PETERSBURG FL 33716

Title MANAGER

Name BROSNAN, AARON

Address 11200 DR. MARTIN LUTHER KING JR.

ST. N

SUITE 103

City-State-Zip: ST. PETERSBURG FL 33716

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: AARON BROSNAN MANAGER 04/12/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date