

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

ARTICLES OF AMENDMENT TO FOREIGN REGISTRATION STATEMENT

Read the Instructions <u>L017i</u>

| 1. | | FITY NAME - give the exact name of the LLC as currently shown in A.C.C. records: |
|----|----|---|
| | EN | GINEERING RESEARCH AND CONSULTING, LLC |
| | | K THE BOX NEXT TO EACH CHANGE BEING MADE AND LETE THE REQUESTED INFORMATION FOR THAT CHANGE. |
| | | LLC NAME CHANGE - NAME IN STATE OR COUNTRY OF FORMATION (Foreign Name) - type or print the exact NEW name: |
| | | Astrion Group, LLC |
| | | |
| 3. | × | LLC NAME CHANGE – NAME USED IN ARIZONA (Entity Name) – type or print the exact NEW name. NOTE: If you are a Foreign Series LLC, the new name must have "series" in it: |
| | | Astrion Group, LLC |
| 4. | | ENTITY TYPE CHANGE – check one and follow instructions: NOTE: you may not change to or from a Foreign Series LLC. |
| | | ☐ Changing to a PROFESSIONAL LLC – number 6 must also be completed. |
| | | Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC). |
| 5. | | PROFESSIONAL SERVICES CHANGE – list the NEW type of professional services the professional LLC will render: |
| 6. | | FOREIGN DOMICILE CHANGE – list the NEW domicile state or country: |
| | | |

| 7. | | PURPOSE / CHAR of business: | ACTER | OF BUSINESS | CHANGE - state the NEW po | urpose o | r character |
|------|----------|--|----------------------|-------------------------------|--|-------------------|------------------|
| 8. | | being made with re | spect to | one or more me | (RS) – <u>see Instructions L012</u> embers, complete and attach iling will be rejected if it is se | the Am | endment |
| 9. | | being made with re | espect to | one or more ma | AGERS) – <u>see Instructions L</u> anagers, complete and attac filing will be rejected if it is s | h the <u>An</u> | <u>nendment</u> |
| 10. | | | | | see Instructions L017i - chec | | |
| | | | | | .C - complete and attach the Mana | | - |
| | | | | | d if it is submitted without the attac | | |
| | | | | | complete and attach the Member d if it is submitted without the attach | | <u>re</u> |
| | | | | | | | |
| 11 | L. 🗆 | STATUTORY AGE | NT CH | ANGE - NEW A | AGENT APPOINTED - see | Instruc | tions L017i: |
| | 11 | REQUIRED - give th an individual or an e | | | 11.2 REQUIRED - Mailing Statutory Agent, if d | | |
| | | or street address Arizona of the NEW | (not a P.O |). Box) in | (can be a P.O. Box): | | |
| - | | | | | Check box if surice as | | |
| Sta | tutory A | Agent Name | | | | | |
| Atte | ention (| optional) | | | Attention (optional) | | |
| | | | | | | | |
| Add | iress 1 | | | | Address 1 | | |
| | | (optional) | | | Address 2 (optional) | Shaha | 71- |
| City | 11. | .3 REQUIRED - the S | State Statutory A | Zip gent Acceptance form M | City 002 must be submitted along with these | State Articles of | Zip Amendment |
| L | | | | | | | |
| 1 | 2. | STATUTORY AGE | ENT CH | ANGE - ADDRE | SS OF EXISTING STATUTO | DRY AG | ENT - |
| - | _ | omplete 12.1 and 12 | | | | | |
| | 17 | 2.1 NEW physical or s (not a P.O. Box) in existing statutory a | Arizona of | | 12.2 NEW mailing addre of the existing statu be a P.O. Box): | | |
| | | | | | | | |
| Att | ention (| (optional) | | | Attention (optional) | | |
| Add | dress 1 | | | | Address 1 | | |
| Add | dress 2(| (optional) | <u> </u> | Γ | Address 2 (optional) | | Γ |
| Cit | v | | State | Zip | City | State | Zip |

| PRINCIPAL ADDRESS CHAN | NGE - list the NEW address: | |
|--|---|-----------------------------|
| | | , |
| Attention (optional) | | |
| 1100 Redstone Gateway, Suite 300 | | |
| Address 1 | | |
| Address 2 (optional) | | 12222 |
| Huntsville | AL | 35808 |
| City UNITED STATES | State or Province | Zip |
| JURISDICTION OF FORMAT 4.1 List the NEW Foreign LLC | FION INFORMATION: street address in jurisdiction of fo | ormation: |
| | | |
| Attention (optional) | | |
| Address 1 | | |
| Address 2 (optional) | | |
| City | State or Province | Zip |
| Country | | |
| 4.2 List the NEW statutory ag NEW street and mailing a Statutory agent name: | ent in the jurisdiction of formation ddresses. | n and the statutory agent's |
| Street address in jurisdict | tion of formation: | |
| Attention (optional) | | |
| (| | |
| Address 1 | | ••• |
| Address 2 (optional) | | |
| City | State or Province | Zip |

Country

13. 🛚

14. 🗌

| | Address 1 | | ŀ |
|-------------|---|--|--|
| | Address 2 (optional) | | |
| | | | 710 |
| | City | State or Province | Zip |
| ĭ S d | Statement was due to an a | N JURISDICTION - if this amendment mendment or restatement of the LLC a certified copy of that foreign amend or to its delivery to the Arizona Corpor | 's Articles in the foreign ment, and it must be dated |
| | | | |
| GNAT | TURE: By checking the b | ox marked "I accept" below, I acknow | vledge <i>under penalty</i> |
| GNAT | FURE: By checking the be of law that this do compliance with A | ox marked "I accept" below, I acknow cument together with any attachment rizona law. | vledge <i>under penalty</i> ts is submitted in |
| GNAT | of law that this do | cument together with any attachment | vledge <i>under penalty</i> ts is submitted in |
| GNAT | of law that this do compliance with A | cument together with any attachment rizona law. | vledge <i>under penalty</i> ts is submitted in March 21, 202 |
| GNAT | of law that this do | cument together with any attachment rizona law. | vledge <i>under penalty</i> ts is submitted in |
| nature | of law that this do compliance with A | cument together with any attachment rizona law. I ACCEPT David Zolet Printed Name fill in the corresponding blank if signi | March 21, 202 Date |
| nature QUIF | of law that this do compliance with A | cument together with any attachment rizona law. I ACCEPT David Zolet Printed Name fill in the corresponding blank if signi | March 21, 202 Date ing for an entity: |
| nature QUIF | of law that this do compliance with A | cument together with any attachment rizona law. I ACCEPT David Zolet Printed Name fill in the corresponding blank if signion sign this document. I am signing on the signing of the s | March 21, 202 Date ing for an entity: |

Mailing address in jurisdiction of formation:

Please be advised that A.C.C. forms reflect only the **minimum** provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business. All documents filed with the Arizona Corporation Commission are **public record** and are open for public inspection. If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.

L017.008 Rev: 1/2021

Filing Fee: \$25.00 (regular processing)

All fees are nonrefundable - see Instructions.

Arizona Corporation Commission - Examination Section

1300 W. Washington St., Phoenix, Arizona 85007

Fax (for Regular or Expedite Service ONLY): 602-542-4100
Fax (for Same Day/Next Day Service ONLY): 602-542-0900

<u>Delaware</u>

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The First State

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE

STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND

CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "ENGINEERING

RESEARCH AND CONSULTING, LLC", CHANGING ITS NAME FROM

"ENGINEERING RESEARCH AND CONSULTING, LLC" TO "ASTRION GROUP,

LLC", FILED IN THIS OFFICE ON THE SIXTEENTH DAY OF DECEMBER,

A.D. 2024, AT 5:40 O'CLOCK P.M.



Charuni Patibande-Sanchez, Secretary of State

C. B. Sanchen

Authentication: 203181977

Date: 03-17-25

3331880 8100 SR# 20251082020 State of Delaware
Secretary of State
Division of Corporations
Delivered 05:40 PM 12/16/2024
FILED 05:40 PM 12/16/2024
SR 20244510051 - File Number 3331880

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF FORMATION OF

ENGINEERING RESEARCH AND CONSULTING, LLC

The undersigned, being duly authorized to execute and file this Certificate of Amendment to Certificate of Formation for the purpose of amending the Certificate of Formation pursuant to Section 18-202 of the Limited Liability Company Act of the State of Delaware, does hereby certify as follows:

FIRST

The name of the limited liability company is Engineering Research and Consulting, LLC (the "Company").

SECOND

Paragraph 1 of the Certificate of Formation of the Company is hereby deleted in its entirety and amended to read in full as follows:

ARTICLE I NAME

The name of the limited liability company is Astrion Group, LLC (the "Company").

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Amendment to Certificate of Formation as of the 16th day of December, 2024.

By: /s/David Zolet

Name: David Zolet

Its: Chief Executive Officer