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(Re	equestor's Name)	
(Ad	ldress)	- :
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Dc	ocument Number)	
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington - De 19808

800-927-9800 302-636-5454 FAX



To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Logan Hall logan.hall@cscglobal.com

Date: March 5, 2019

Order#: 633385/094

Re: KATMAI SIMSYSTEMS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Logan Hall c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.

. ()	12001 Science Drive, Suite 160	(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
			Suite 204
	Orlando. FL 32826		Anchorage, AK 99515
	05/08/2007		L07000048821
	Date of filing/registration in Florida	4.	Document number
. (a)	CT CORPORATION SYSTEM		
. ,	Registered Agent and Registered Office shown on the records of t	he Florida	a Dept, of State:
	1200 SOUTH PINE ISLAND ROAD		
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)	2
	Plantation FL	22224	drew:
	, PL	33324	<u></u>
(b)	Corporation Service Company		- C (8)
()	Enter name of NEW Registered Agent and/or NEW Registered	Office add	dress:
			<u></u>
	1201 Hays Street		
	NEW Registered Office Address:		
			
	Tallahassee FL	32301	
ne cha gent w /as/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of class of organization or the operating agreement of the	the regist ibility cor f the limi	stered office and the business office of the regist ompany, it is hereby confirmed that the change(s nited liability company or as otherwise provided
	XI el & GOULE	Jill C	Cilmi, Authorized Person
	ure of a grember or authorized representative of a member		Printed or typed name of signee
Signat	die 10 a Retiner of Authorized representative (i a member		Times of types name of Signes