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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608,416 or 608,508, 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.

1. Name of the limited liability company: BERING S	TRAITS INFORMATI	ON TECHNOLOG
2. (a) Principal office address of limited liability compar	ny: 4600 DeBar	r Rd., Suite 200
(<u>Note: MUST BE STREET ADDRESS</u>)	***************************************	
	Anchorage, AK 9950)8
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)	**************************************	<u> </u>
April 6, 2012	· M1200000	02023 6
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida	- 一般の '47
Registered Agent:	NRAI Services, Inc.	
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD	
	PLANTATION, Florida 33324	
<u>NEW</u> Registered Office Address; (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Drive	
(MOST BE FLORIDA STREET ADDRESS)	Tallahassee	.FL 32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(of the members of the limited liability company or as other the operating agreement of the limited liability company.	Florida street address of the ntical. Or, in the case of a lest was/were authorized by a crwise provided in the artic	e registered office Florida limited an alfirmative vote
Signame of a member of authorized terresentative of a member	<u> </u>	
BERING STRAITS NATIVE CORPORATION Printed or typed name of signee	and the comments of the commen	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I can familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to maddress, thereby confirm that the limited liability compa	,	y. I further agree to nance of my duties, as provided for in a registered office ing of this change.
Division of Corporations, P.O. Box 6	,	14

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