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| (Requestor's Name) | | | | |
|---|-------------------|--------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/S | tate/Zip/Phone #) | | | |
| PICK-UP | WAIT | MAIL | | |
| (Busine | ess Entity Name) | | | |
| (Document Number) | | | | |
| Certified Copies | Certificates of | Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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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: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: August 15, 2019

Order#: 887626-005

Re: KATMAI RESOURCE MANAGEMENT, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ashley Jiminez

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

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

OUCA.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.

| 1. Na | ame of the limited liability company: KATMAI RESOL | JRCE MA | NAGEMEN | IT. LLC |
|---|---|---------------------------------------|--|--|
| 2. (a) | 11001 O'Malley Centre Drive | (b)11001 O'Malley Centre Drive | | |
| , | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | ··· (-/ | M | ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | Suite 204 | _ | Suite 204 | |
| | Anchorage, AK 99515 | _ | Anchorage | e, AK 99515 |
| | 06/13/2012 | M12000003342 | | |
| 3. | Date of filing/registration in Florida | 4. | I | Document number |
| 5. (a) | Clements, Thomas | | | |
| | Registered Agent and Registered Office shown on the records of the | he Florida | Dept. of State: | |
| | 12001 Science Drive | | | |
| | Registered Office Address (MUST BE FLORIDA STREET A | DDRESS) | | |
| | Suite 160 | | | |
| | Orlando , FL | 32826 | | |
| (b) | Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered 6</u> | Office add | ress: | 7013 AUG 20 MILL U8 |
| | 1201 Hays Street | | | 是是 |
| | NEW Registered Office Address: | - | | 1.08 |
| | Tallahassee . FL_ | 32301 | | |
| the cha agent v was/we | imited liability company is not organized under the law inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l | the regist bility cor Tthe limi | ered office an pany, it is leed liability | and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in |
| | s/ R. David Stephens | <u>R. Da</u> | vid Stepher | ns, Member |
| Signa | ture of a member or authorized representative of a member | | 1 | Printed or typed name of signee |
| provisi the obl to mere notified | by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address. I have a change of this change | performa! for in C. ereby col | nce of my di hapter 605, hfirm that th | city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been company. Asst. Vice President |