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TO:

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Registration Section

Division of Corporations Kopernik Global Investors, LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Sarah L. Bertrand Name of Person Kopernik Global Investors, LLC Firm/Company Two Harbour Place, 302 Knights Run Avenue, Ste. 12 Address Tampa, FL 33602 City/State and Zip Code sbertrand@kopernikglobal.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sarah L. Bertrand Area Code & Daytime Telephone Number Name of Person MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: ☐ \$55 Filing Fee & Certified Copy ☑ \$25 Filing Fee

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.

. Na	me of the limited liability company: Kopernik Glob	oal Investors, L	LC		
. (a)	Two Harbour Place	(b) Same as Principal Office			
(u) <u>-</u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	302 Knights Run Avenue, Suite 1225				
	Tampa, FL 33602				
	June 25, 2018	M13000	M13000003167		
5.	Date of filing/registration in Florida	4.	Document number	er	
5. (a)	Robert S. Lamont, Jr.				
	Registered Agent and Registered Office shown on the records of the	he Florida Dept. of St	iate:		
	Two Harbour Place			* 1 8	
	Registered Office Address (MUST BE FLORIDA STREET A	_			
	302 Knights Run Avenue, Suite 1225			** ' \(\sigma\)	
	Tampa, FL_	33602			
	Sarah L. Bertrand			□ α,	
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	<u> </u>	* 12 P	
	No change to Registered Office Address			<i>9</i> -	
	NEW Registered Office Address:	-		·	
	, FL				
he cha igent y was/we	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the	the registered off ibility company, i I the limited liabi	ice and the business t is hereby confirmed lity company or as company.	s office of the registered at that the change(s)	
Signa	ture of a member or authorized representative of a member	227.0	Printed or typed name of signee		
	hy accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a clounge in the registered office address. It is whiting of this alrange.				