

M20000002310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
MAY - 1 2023

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2023 APR 28 AM 10:06
SECRETARY OF
TALLAHASSEE

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49

2023 APR 28 AM 10:06
SECRETARY OF
TALLAHASSEE, FLOR.

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CT CORP
(850)656-4724
3458 Lakeshore Drive,
Tallahassee, FL 32312

Date: 04/28/2023

Acc#120160000072

W: C DW

| | |
|-------------|---------------------------|
| Name: | SUVI Global Services, LLC |
| Document #: | |
| Order #: | 14891439 |

| | | | |
|-----------------------------------|--------------------------|-------------------------|--|
| Certified Copy of Arts & Amend: | <input type="checkbox"/> | | |
| Plain Copy: | <input type="checkbox"/> | | |
| Certificate of Good Standing: | <input type="checkbox"/> | | |
| Certified Copy of | <input type="checkbox"/> | | |
| Apostille/Notarial Certification: | <input type="checkbox"/> | Country of Destination: | |
| | | Number of Certs: | |

| | |
|---|--|
| Filing: <input checked="" type="checkbox"/> | Certified: <input checked="" type="checkbox"/> |
| | Plain: <input type="checkbox"/> |
| | COGS: <input type="checkbox"/> |

Email Address for Annual Report Notifications:

Availability _____
 Document _____
 Examiner _____
 Updater _____
 Verifier _____
 W.P. Verifier _____
 Ref# _____

Amount: \$ **55.00**

Thank you!

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

2023 APR 28 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
D

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: AKIMA PROGRAM SUPPORT, LLC

Enter new principal office address, if applicable: _____

(Principal office address
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____

(Mailing address
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M20000002386

3. Jurisdiction of its organization: Alaska

4. Date authorized to do business in Florida: 03/02/2020

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: SUVI GLOBAL SERVICES, LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

| <u>Title/Capacity</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|-----------------------|-------------|----------------|---------------------------------|
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
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| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |

9. Attached is a certificate, if required; no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Digitally signed by Michael A. Braun
 DN: cn=Michael A. Braun, o=Michael A. Braun, email=Michael.A.Braun@kluwer.com, c=US
 Reason: I am the signer of this document.
 1.3.6.1.5.5
Michael A. Braun

 Signature of the authorized representative

Michael A. Braun

 Typed or printed name of signee

Filing Fee: \$25.00

State of Alaska
Department of Commerce, Community, and Economic Development
Corporations, Business, and Professional Licensing

I certify that the attached 2 page(s) are a true copy of the records on file with
the Department of Commerce, Community, and Economic Development,
Division of Corporations, Business, and Professional Licensing.



A handwritten signature in black ink, appearing to read "Julie Sande".

Julie Sande
Commissioner

Certified By: 

Karen Reynolds

Date: April 25, 2023

*This document is not valid unless an original signature is present.

Alaska Entity #10053246

State of Alaska
Department of Commerce, Community, and Economic Development
Corporations, Business, and Professional Licensing

Certificate of Amendment

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, hereby certifies that a duly signed and verified filing pursuant to the provisions of Alaska Statutes has been received in this office and has been found to conform to law.

ACCORDINGLY, the undersigned, as Commissioner of Commerce, Community, and Economic Development, and by virtue of the authority vested in me by law, hereby issues this certificate to

SUVI GLOBAL SERVICES, LLC
formerly
AKIMA PROGRAM SUPPORT, LLC



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective June 20, 2022.

A handwritten signature in black ink, appearing to read "Julie Sande".

Julie Sande
Commissioner

AK Entity #: 10053246
Date Filed: 06/20/2022
State of Alaska, DCCED



State of Alaska
Division of Corporations, Business and Professional Licensing
CORPORATIONS SECTION
PO Box 110806
Juneau, AK 99811-0806
Phone: (907) 465-2550
Fax: (907) 465-2974
Website: www.commerce.alaska.gov/occ

DO NOT STAMP ABOVE THIS BOX
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RECEIVED
Juneau
JUN 20 2022

Division of Corporations, Business
and Professional Licensing

CC 25 Pe

ARTICLES OF AMENDMENT
Domestic Limited Liability Company
AS 10.50.100

\$25.00 Filing Fee (non-refundable)

Pursuant to Alaska Statutes 10.50.100, the undersigned corporation adopts the following amended Articles of Organization.

| | |
|------------------------------------|-------------------------|
| ITEM 1: Name of the Entity: | Alaska Entity #: |
| Akima Program Support, LLC | 10053246 |

ITEM 2:

| | |
|--|------------|
| Date the original Articles of Organization were filed: | 03/07/2017 |
|--|------------|

ITEM 3: List each article number being amended, and the amended article in full. Any article being changed is considered an amendment; this includes deletions, edits, corrections, or renumbering of the articles. Verify with previous Articles of Organization and amendments already filed.

The following Article shall be amended to read:

Article I: Name of the Company:

SUVI Global Services, LLC

Attach a separate sheet if needed.

ITEM 4: The Articles of Amendment must be signed by a member, manager, or Attorney-in-Fact.

| | | | |
|----------------------|---------------|------------------|------------|
| <i>Ashley Rorrer</i> | Ashley Rorrer | Attorney-in-Fact | 06/20/2022 |
| Signature | Printed name | Title | Date |

If signing on behalf of a member or manager which is an entity, then identify signer's relationship and signing authority with the member entity. For example: John Smith, President of XYZ Inc. the sole member of ABC LLC.

Mail the Articles of Amendment and the non-refundable \$25.00 filing fee in U.S. dollars to:
State of Alaska, Corporations Section, PO Box 110806, Juneau, AK 99811-0806

STANDARD PROCESSING TIME for complete and correct applications submitted to this office is approximately 10-15 business days. All applications are reviewed in the date order they are received.