M21000012224

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Account#: 120000000088

Date: 04	4/25/2023	
Name:	Merritt Walker	
Reference #:	1782238	
Entity Name:		KADIAK, LLC
☐ Articles		ation to Transact Business
	of Agent	
Reinstat	ement	
Convers	ion	
Merger		
Dissolut	ion/Withdrawal	
Fictitious		
Other		
Authorized Ame	ount: \$25	
Signature:	mw	

F: 800.944.6607

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.

(a)				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		•	of limited liability company BE POST OFFICE BOX
	No Change		No Change	
	September 14, 2021		M21000012224	
	Date of filing/registration in Florida	4.	Document nu	ımber
(a)	Corporation Service Company			
. ()	Registered Agent and Registered Office shown on the reco	Dept. of State:	202	
	1201 Hays Street		2023	
	Registered Office Address (MUST BE FLORIDA ST			
	registered office Address Street DE CEORDS 371	<u>REET ADDRESS)</u>		: 25
	Tallahassee		2525	25
(b)		22201	2525	\sim
(b)	Tallahassee	. FL_32301-		25
(b)	Tallahassee COGENCY GLOBAL INC.	. FL_32301-		25
(b)	Tallahassee COGENCY GLOBAL INC. Enter name of NEW Registered Agent and/or NEW Reg	. FL_32301-		25

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Thomas H. Panamaroff

Thomas H. Panamaroff

Signature of a member or authorized representative of a member

Printed or typed name of signee

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.

/s/ Timothy Mayville

Signature of Registered Agent

Timothy Mayville, Assistant Secretary
Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314
FILING FEE: \$25.00