F060000005378

(Re	equestor's Name)		
(Address)			
(Ac	ldress)		
(Ci	ty/State/Zip/Phone	≘#)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

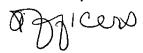
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COVER LETTER

	•		
то:	Amendment Section Division of Corporations		
SHRI	JECT: KONA MACADAMIA, INC.		
30110	Name	e of Corporation	
DOC	UMENT NUMBER: F06000005378		
The en	nclosed <i>Affidavit by Foreign Corporation t</i>	o Change/Add Office	er(s) and/or Director(s) and fee are
Please	e return all correspondence concerning this r	matter to the followin	g:
CHR	RISTI HING		
	Name of Contact Person		
KON	IA GRILL		
	Firm/Company		
7150	DE CAMELBACK RD #220		
	Address		
200	OTTSDALE, AZ 85251		
300	City/State and Zip Code	<u> </u>	
	·		
HIN	G@KONAGRILL -mail address: (to be used for future annual repo	Lauranes e e	1
Е	E-mail address: (to be used for future annual repo	ort notification)	*
For fu	orther information concerning this matter, place	ease call:	
	, p.		
CHF	RISTI HING at (480) 922-810 Trea Code & Daytime 1	00
	Name of Contact Person A	rea Code & Daytime T	Telephone Number
Enclos	sed is a check made payable to the Florida E	Department of State for	or the following amount:
(\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corpor Clifton Building 2661: Executive Co Tallahassee, FL 32	rations enter Circle

CR2E127 (10/11)



FILED

2011 DEC 12 PM 12: 54

FLORIDA DEPARTMENT OF STATE

TALLAHASSEE. FLORIDA

DIVISION OF CORPORATIONS

AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

1. The name of the foreign corporation KONA MACADAMIA, INC.	The name of the foreign corporation as it appears on the records of the Florida Department of State is: KONA MACADAMIA, INC.		
2. This entity was authorized to transa number is F06000005378	ct business in Florida on and its Florida documen		
3. This corporation was formed under	corporation was formed under the laws of DELAWARE		
4. The name and address of each offic	n officer and/or director is as follows:		
<u>Title:</u>	Name and Address		
PRESIDENT	MICHAEL NAHKUNST		
	7150 E CAMELBACK RD #220		
	SCOTTSDALE, AZ 85251		
SECRETARY	CHRISTI HING		
	7150 E CAMELBACK RD #220		
	SCOTTSDALE, AZ 85251		
DIRECTOR	MICHAEL NAHKUNST		
	SAME AS ABOVE		
DIRECTOR	CHRISTI HING		
	SAME AS ABOVE		
(Attach	additional pages if necessary)		
With this	SECRETARY		
high Hing nature of all officer or director	Title of person signing		
ISTI HING and or printed name of person signing	FILING FEE \$35 Make checks payable to Florida Department of State and Mail to: Division of Corporations PO Box 6327 Tallahassee, FL 32314		

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