W4000076890

(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:			
L			

Office Use Only



600041560756

WHO WAS THE HUMBA

TRANSMITTAL LETTER

TO: Reg Div	istration Section sion of Corporations			
SUBJECT:	KAHUNA BROTHERS II, LLC			
	(Name of Lin	nited Liability Company)		
The enclosed	Articles of Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspondence concerning this matter	to the following:		
	Helen R. Ficarra, Administrat	or		
	(N	lame of Person)		
	Alvarez, Sambol, Winthrop & Mads	on, P.A.		
	(F	Firm/Company)		
	P.O. Box 3511	(Address)	·	
	Orlando, FL 32802-3511			
	(City/S	State and Zip Code)		
For further in	formation concerning this matter, please co	all:		
Hel	en R. Ficarra	at (407) 398-123	8	
	(Name of Person)	(Area Code & Daytime	Telephone Number)	Trans
Enclosed is a	heck for the following amount:			
□ \$25.00 Fili	ng Fee	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee Certificate of Status Certified Copy (additional copy is errolosed)	Stand Calan. Oshi

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Present Name)
(A Florida Limited Liability Company)

KAHUNA BROTHERS II, LLC

FIRST:	The Articles of Organization were filed on OCTOBER 22, 2004 and assign document number LO4000076890 .	ned		
SECOND	The following amendment(s) to the Articles of Organization was/were adopt liability company:	ed by the limit	ed	
The initial replacement by a	Manager of the Company shall be P. RAUL ALVAREZ, JR., who shall serve until his Majority of the Members.	Resignation or F	Remova	al and
			AMEN Next Me	
Dated Oct	ober 29	Nation 1	410 A	
	Signature of a member or authorized representative of a member	ORIDA	27 1:3	
	GRIFFITH J. WINTHROP, III	<u> </u>		
	Typed or printed name of signee			

Filing Fee: \$25.00