

L1600000 73906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

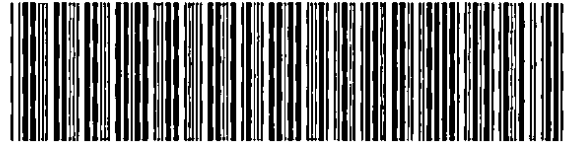
(Business Entity Name)

(Document Number)

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D SCOTT
JUL 1 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AKNAH FUNDS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID W. SOUTHWELL

Name of Person

TRUST ADVISORS CORPORATION

Firm/Company

5781-B NW 151 STREET

Address

MIAMI LAKES, FL 33014

City/State and Zip Code

AGENT@TRUSTADVISORSCORP.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID W. SOUTHWELL

305 822-8161

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LENZ, HENRY	1751 SW 97 COURT	<input type="checkbox"/> Add
		MIAMI, FL 33165	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LENZ, HENRY	9935 VERONA MANOR	<input checked="" type="checkbox"/> Add
		VERO BEACH, FL 32966	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b), **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated JUNE 13 2019

Typed or printed name of signee