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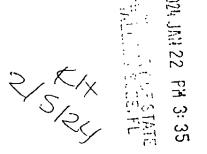
(Re	questor's Name)	-
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT:	Ohana file an	ted Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Caysal M	Name of Person MEAMY //C		
	<u>Ohanat</u>	Firm/Company		
	1406 SE	31 ST Terr		
	Cape Con	City/State and Zip Code Of M S // O 9M o be used for future annual report notifi	.4	
	Chanafire a E-mail address:	OMS //C @ 9M to be used for future annual report notifi	cation)	
For further information co	oncerning this matter, please co	ull:	203	
Crystal M. Name of	Tantay Person	at (959) 565 Area Code Daytime		3 44. 2
Enclosed is a check for the	e following amount:		PH S60.00 Filing Fee, LAT 42	- 1 122 P
•	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	I

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OHANAFIRE	arms	LLC			
(Name of the Limite	d Liability Com A Florida Limite	pany as it now app d Liability Compan	ears on our records y)	<u>r)</u>	
The Articles of Organization for this Limited Liz	ability Compar	ny were filed on		and a	ssigned
Florida document number <u>L3244018</u>	<u> 751.</u>				
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited lis	bility company	<u>here</u> :		
The new name must be distinguishable and contain the wo	ords "Limited Lia	bility Company," th	e designation "LLC"	" or the abbreviation "	L.L.C."
Enter new principal offices address, if applica	ıble:				
(Principal office address MUST BE A STREE)	T ADDRESS)				
				.	
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE E	<u>30X)</u>				~
		***************************************			<u> </u>
				E	
B. If amending the registered agent and/or reagent and/or the new registered office address	_	e address on ou	r records, <u>enter</u>	the name of the n	ew registered
	 _			٠ <u>٠</u> ٠	P
Name of New Registered Agent:	<u>Cr</u>	ystal	Marie	Tantay	/ <u>u</u>
New Registered Office Address:	_5A1	ME	9. 12	一四	35
		t.nier i	lorida street address	S .	
		City	, Flo	oridaZip Code	
		CHY		zφ coa	-

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.

Changing Aggistered Agent, Signature of New Registered Agent

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 **Type of Action** Crystol M. Tantay 1406 SE 31ST Terr. XAdd Cape Coral FL 33904 DRemo Change \square Add Remove Change Remove ☐ Change \square Add ☐ Change □Add Remove

□ Change

/7	DDING CRYSTAL Marie Tantay	-
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ctive d	ate, if other than the date of filing: (optional) (optional) tate is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60	<u></u>
e: If the	e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lis	163
ument's	effective date on the Department of State's records.	
	m の Tipot	ユエ (ム)
	recifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aft	er th
filed.	ार्च	O1
ed	9117 2924	
_	Signature of a member or authorized representative of a member	
	Signature of a member of audustized representative of a member	
	(1) and (1)	

Filing Fee: \$25.00