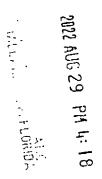
## L22000370250

	(Requestor	's Name)	
	(Address)	<del></del> .	
	(Address)		
	City/State/	Zip/Phone #)	<u> </u>
	•	. ,	
PICK-UP		WAIT	MAIL
(	Business E	Entity Name)	7.1
(	Document	Number)	
Certified Copies	_	Certificates o	f Status
Special Instructions to	Filing Office	er.	

Office Use Only



800393556828



FLORIDA CAPITAL COURIER SERVICES 2330 CLARE DRIVE	. INC
TALLAHASSEE, FL 32309	
(850) 524-5437	
(850) 524-6243	
•	
PLEASE use funds from ACCT: 12021000	00160 AMOUNT: <u>\$25.00</u>
Authorization Signature:faust but	<u></u>
	00370250
Business E	Oocument #
Walk in	Pick up time
<u> </u>	
Mail out	Will wait
Photocopy	
Certified Copy (s) of Articles of Incor	poration
Certificate of Status	
<u>NEW FILINGS</u>	<u>AMMENDMENTS</u>
Profit	X Amendment
Not for Profit	Resignation of R.A. Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other CORP	Merger Conversion
CORI	Articles of Conversion
OTHER FILINGS	REGISTRATION/QUALIFICATIONS
Annual Report	Foreign filing
	Limited Partnership
Fictitious Name	Reinstatement
APOSTIL( )	Other
Country	

EXAMINER'S INITIALS:\_\_\_\_\_

## **COVER LETTER**

TO: Registration S Division of Co			
The Aloha	Fund 2, LLC		
SUBJECT:			
	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Mauricio Rauld		
		Name of Person	
	Premier Law Group		
		Firm/Company	
	1810 S. El Camino Real, S	uites E & F	
		Address	<del></del>
	San Clemente, CA 92672		
		City/State and Zip Code	
	E-mail address: (	to be used for future annual report no	outcation)
For further information	concerning this matter, please c	all:	
Jennifer Ruwe		626 590-4184	
Name	of Person	at ()	ime Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	<ul><li>\$60.00 Filing Fee.</li><li>Certificate of Status &amp;</li></ul>

Mailing Address:

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

Street Address:

(additional copy is enclosed)

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

Certified Copy (additional copy is enclosed)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

npany as it now appears on our records.) ed Liability Company)	<del></del>
any were filed on August 22, 2022	and assigned
iability company here:	
iability Company," the designation "LLC" or	the abbreviation "L.L.C."
<u> </u>	
	<del></del>
ce address on our records, <u>enter the</u>	name of the new regist
	<u> </u>
Enter Florida street address	
T*1* .3	les.
, Florid	ia Zip Code
	ability company here: ability Company," the designation "LLC" or ce address on our records, enter the  Enter Florida street address , Florid

## 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.

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>	Address	Type of Action
		<del></del>	□Add
			□Remove
			□Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change
			□Add
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<del></del>	<del></del>		□ Add
			□ Remove
		•	☐Change
			□Add
			□ Remove
			□Change
		** <del>***********************************</del>	□Add
			□Remove
			□Change

	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u></u>	
	<del></del>
<del></del>	
	<del></del>
(If an effective d Note: If the	e, if other than the date of filing:
he record speci ord is filed.	ies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Augus	26 2022
Dated	Paul
_	Signature of a member or authorized representative of a member
М	uricio Rauld
_	Typed or printed name of signee

Filing Fee: \$25.00