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(Ře	questor's Name)	
(Ad	dress)	.
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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COVER LETTER

TO:

Registration Section

Division of Corp	orations		
Support Bra	KAHLINA PAWER	Wassing LLC	
SUBJECT: OR	KAHUNA POWER Name of Lim	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	JOSEPH	Name of Person	
	BIG KAHUNA	POWER WASILING 1	<u>-LC</u>
	8032 JOSEFA	A WAY Address	······································
	NAPLES	FLORIDA 34114 City/State and Zip Code Gamail. Com to be used for future annual report not	
	jhunter 4th E-mail address: (1	@ gmail. Com to be used for future annual report not	iffication)
For further information cor	neerning this matter, please ea	all:	
JOSEPH H. Name of I	HUNTER	at (<u>310</u>) <u>531</u> Area Code Daytin	ne Telephone Number
Enclosed is a check for the	following amount:		
☐ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ 855.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration So	•	<u>Street Address:</u> Registration Se	ection
Division of Co		Division of Co	
P.O. Box 6327		The Centre of	
Tallahassee, Fl	1. 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIG KALLUND POWER WE (Name of the Limited Liability Compa	SHING LLC
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000509177</u> .	were filed on $12/5/2022$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	24
(Principal office address MUST BE A STREET ADDRESS)	EP EP
	<u> </u>
	照年 ま ら
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	32 2003 2003
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	iddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>AMBR</u>	HEATHER HUNTER	8032 JOSEFA WAY	□Add
			[√Remove
			☐ Change
			□Add
			Remove
			☐ Change
			∐Add
		<u> </u>	Remove
			□ Change
			□Add
			□Remove
			□ Change
		<u></u>	□Add
			□Remove
			Change
			□Add
			□Remove
			ClChanna

<u> 10256677</u>	H. HUNTER	100%	OWNER
····			
If the date in	other than the da isted, the date most b iscreed in this block we date on the Depa	k does not me	cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 eet the applicable statutory filing requirements, this date will not be listate's records.
ord specifies a liled.	delayed effective d	late, but not a	an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
1_Augus	T 27 TI Z	024 .	11:00 AM
		/	
	Si	gnature of a m	ember or authorized representative of a member

Filing Fee: \$25.00