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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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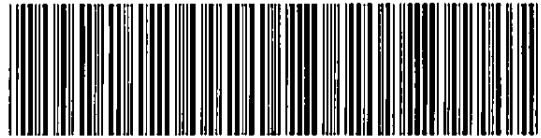
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Honor First Foundation LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Edward Miyagishima

Name of Person

Honor First Foundation LLC

Firm/Company

100 S. Ashley Dr. Ste 600

Address

Tampa, Florida 33640

City/State and Zip Code

ed@HonorFirstGroup.com

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

For further information concerning this matter, please call:

Edward Miyagishima

at (202) 674-4545

Name of Person

Area Code

Telephone Extension/Number

Enclosed is a check for the following amount:

1. \$25.00 Filing Fee

= \$25.00 Filing Fee &
Certificate of Status

2. \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

3. \$25.00 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 Address:

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

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Honor First Foundation LLC

Name of the Limited Liability Company as it now appears on our records.
(A Change of Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on May 29, 2024 and assigned
Florida document number: 1200021500

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Honor First Group LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC," or the abbreviation "L.L.C."

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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 and my family will 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 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:

AMBR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
		_____	☐ Add
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		_____	☐ Change
		_____	☐ Add
		_____	☐ Remove
		_____	☐ Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: _____ (optional)

Note: If the date inserted in this document 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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated June 27, 2024.

Noted as a member or authorized representative of a member

References and Notes

Typed or printed name of signee

Filing Fee: \$25.00