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T. LEMIEUX NOV 24 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Aloha Pama Inc			
DOCUMENT NUM	BER: P20000044314			
	of Amendment and fee are sul	bmitted for filing.		
Please return all corre	spondence concerning this mat	tter to the following:		
	Kim Kurnow or James M. Le	onard		
	Name of Contact Person			
	Aloha Pama Inc.			
		Firm/ Company		
	45 Haele Place			
		Address		
	Makawao, Hi. 96768			
	City/ State and Zip Code			
	kkurnow@yahoo.com	sed for future annual report		
For further information	on concerning this matter, pleas	se call: at (850	499-8383	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment

to

Articles of	Incorporation	
Alala Danas	of	
Hona rama	100.	
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)	
+ 2000099	1314	
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	nis Florida Profit Corporation adopts the following a	mendment(s) to
A. If amending name, enter the new name of the corporation:		
	71	he new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.	A professional corporation name must contain t	"Corp.," he word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office a	ddrass in Florida, enter the name of the	3
new registered agent and/or the new registered office addi	ess:	<u>:</u>
Name of New Registered Agent		, [
	<u> </u>	111
(Florida	street address)	
New Registered Office Address:	Florida : Florida	
Hew Registered Office Address.	(City) (Zip Çgo	le)
New Registered Agent's Signature, if changing Registered Ag	ent:	
I hereby accept the appointment as registered agent. I am famili		

Signature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	James M. Leonard	45 Haele Place Makawao, Hi. 9676
x Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	(Be specific)

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	4
en amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
ill dillettatilett provides for all exer	endment if not contained in the amendment itself:
rovisions for implementing the ame	
rovisions for implementing the ame (if not applicable, indicate N/A)	
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rovisions for implementing the ame (if not applicable, indicate N/A)	

The date of each amendment(s date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
oncome date <u>in applicable</u> .	(no more than 90 days after amendment file c	date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing required Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sha	areholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the sufficient for approval.	amendment(s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The follower each voting group entitled to vote separately on the amend	owing statement ment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
10/22/202 Dated		
Signature	JAM LO	· .
select	director, president or other officer – if directors or officers ha ed, by an incorporator – if in the hands of a receiver, trustee, nted fiduciary by that fiduciary)	ve not been or other court
	James M. Leonard	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	