### I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBIN WILSEY

City-State-Zip: CLEARWATER FL 33762

**AUTHORIZED** REPRESENTATIVE

Electronic Signature of Signing Authorized Person(s) Detail

Authonizeu	reison(s) Detail.			
Title	MBR	Title	MGR	
Name	NCF CORPORATION	Name	WILMOT, RYAN	
Address	1901 ULMERTON RD	Address	2947 HOLIDAY CT	
City-State-Zip:	STE 400 CLEARWATER FL 33762	City-State-Zip:	MORGAN HILL CA 95037	
Title	AUTHORIZED REPRESENTATIVE			
Name	WILSEY, ROBIN			
Address	1901 ULMERTON RD STE 400			

STE 400 CLEARWA	TER, FL 33762	JS			
The above n	amed entity submit	this statement for the purpose of c	changing its registered office or r	egistered agent, or b	ooth, in the State of Florida.
SIGNATI	JRE:				
	Electroni	c Signature of Registered Agen	t		
Authoriz	ed Person(s)	Detail :			
Title	MBR		Title	MGR	

**Current Principal Place of Business:** 2947 HOLIDAY CT MORGAN HILL, CA 95037

### **Current Mailing Address:**

1901 ULMERTON RD CLEARWATER, FL 33762 US

## Name and Address of Current Registered Agent:

**STE 400** 

NCF CORPORATION 1901 ULMERTON RD

FEI Number: 20-4326440

DOCUMENT# L16000223601

# Entity Name: KUKUI FOUNDATION, LLC

## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### FILED Feb 21, 2023 Secretary of State 5221347718CC

Certificate of Status Desired: No

Date

Date

02/21/2023