

**ADDRESS CHANGE LETTER  
Officer/Director/Member/Manager/Partner**

No Fee

Department of Commerce and Consumer Affairs  
Business Registration Division  
P. O. Box 40  
Honolulu, Hawaii 96810

Date: \_\_\_\_\_

RE: \_\_\_\_\_  
(Name of Entity)

The Officers/Directors/Member/Manager/Partner of the entity stated above has **changed its mailing address.**

Name: \_\_\_\_\_

Office Title: \_\_\_\_\_

(New) Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_

Office Title: \_\_\_\_\_

(New) Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_

Office Title: \_\_\_\_\_

(New) Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_

Office Title: \_\_\_\_\_

(New) Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name: \_\_\_\_\_

Office Title: \_\_\_\_\_

(New) Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I certify under the penalties of the Hawaii Revised Statutes that I am authorized to make this change for the entity and the statements herein are true and correct in all material respects.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Sincerely,

\_\_\_\_\_

(Signature)

\_\_\_\_\_

(Print Name and Office Title)