NAME CHANGE LETTER TN REGISTRANT

No Fee

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

| Date: | | |
|-----------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------|
| Trade name | e: | |
| File Numbe | er: | |
| Certificate I | Number: | |
| I have chan | nged my name from | egistrant) |
| | If registrant is a non-registered entity that h State, Province or Country of formation in v | |
| | (Type/Print State, Province or Country of formation) | along with the type of entity formed as |
| | (Type/Print type of entity formed) | |
| to (Type/Print | New Name of Registrant) | |
| | alty of perjury, I certify that I am the registrant herein are true and correct in all material re | |
| Sincerely, | | |
| (Signature of R | Legistrant, Under New Name) | |
| (Type/Print Nar | me of Registrant and Office Title) | |