

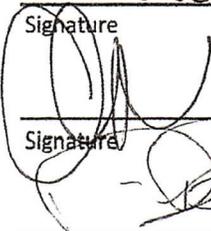
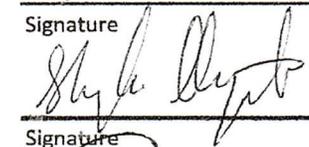
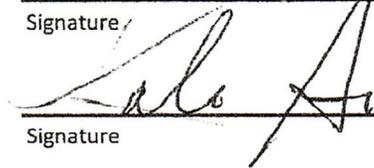
(SAMPLE - Use of This Form Is Not Required)

**Homestead and Beneficiary Associations (HBA) List Registration Document
Provided for the Convenience of HBA**

**Organization Name (optional – please translate any Hawaiian names to English as best as possible)		‘ĀāĒēĪŌōŪū	
Piihonua Hawaiian Homestead Community Association			
** Your organization is a (please check the appropriate box): →		<input checked="" type="checkbox"/> Homestead Association	<input type="checkbox"/> HHCA Beneficiary Association
**Mailing Address (P.O. Box, Street, City, State, Zip Code)			
37 Waiea Place Hilo, HI 96720			
**Electronic Mail Address to be listed	Telephone Number to be listed	World Wide Web address to be listed	Year Association founded
phhcahilo@gmail.com	(808)-920-5072	phhca.org	2011
**Please summarize the services your organization provides:			
<p>1} Promote the social welfare of the Piihonua homestead community and surrounding Native Hawaiian and General Community through activities that strengthen communities and family.</p> <p>2} To educate and strengthen the cultural identity and self-esteem of Hawaii's youth and community through instruction of Hawaiian History, culture and values.</p> <p>3} To preserve and protect Hawaii's natural environment through the stewardship of lands consistent with traditional methods of resource management.</p>			
** For Homestead Associations: Please provide a description of the territory or geographic area your organization represents		** For HHCA Beneficiary Associations: Please provide a description of the beneficiaries your organization represents	
Piihonua Hawaiian Homestead, Island of Hawaii			
**Please attach to this form a statement of your organization's governing procedures and check the box for completion: → (e.g., a copy of your organization's charter or other governing documents)			<input checked="" type="checkbox"/> Documents attached
**Please check the appropriate box below and sign and date the accompanying statement certifying that your organization is a Homestead Association or HHCA Beneficiary Association, and giving the U.S. Department of the Interior Office of Native Hawaiian Relations permission to list the information above and post it for public access on the Office's website.			
<input checked="" type="checkbox"/> Homestead Association: I/we the undersigned certify that I/we are the governing body for the organization listed above and that our organization is: controlled by HHCA beneficiaries; represents and serves the interests of its homestead community; and has as a stated primary purpose the representation of, and provision of services to, its homestead community.		<input type="checkbox"/> HHCA Beneficiary Association: I/we the undersigned certify that I/we are the governing body for the organization listed above and that our organization is: controlled by beneficiaries who submitted an application to the State of Hawai'i Department of Hawaiian Home Lands for a homestead and are awaiting the assignment of a homestead; represents and serves the interests of those beneficiaries; and has as a stated primary purpose the representation of, and provision of services to, those beneficiaries.	
<i>Ronald T. Kodani</i> Signature	Ronald T. Kodani Printed Name and Title	President	3/19/2021 Date
<i>[Signature]</i> Signature	Anolia Kalehika Printed Name and Title	Vice-President	3/19/2021 Date
<i>[Signature]</i> Signature	Miyasato Printed Name and Title	Secretary	3/19/2021 Date
<i>[Signature]</i> Signature	Raanei K Malani Printed Name and Title	Secretary	3/19/2021 Date
(if more signature lines are needed, please continue on the back of this page)			

**Denotes required field. All others are optional.

To register, complete and send this form and additional required information to the U.S. Department of the Interior, Office of Native Hawaiian Relations, 1849 C Street NW, MS 3561, Washington, DC 20240, or PO Box 50165, Honolulu, HI 96850. If you have any questions, please call (808) 541-2693, ext. 723.

	Doreen K. Kodani Doreen K. Kodani	Treasurer	3/19/2021
Signature	Print Name	Title	Date
	Cara Dudoit	Director	3/19/2021
Signature	Print Name	Title	Date
	DANIEL RHODES	Director	3/19/2021
Signature	Print Name	Title	Date
	Shayla Miyasato	Director	3/19/2021
Signature	Print Name	Title	Date
	Liane M. Aki	Director	3/19/2021
Signature	Print Name	Title	Date
	KALED AKI	Director	3/19/2021
Signature	Print Name	Title	Date

BY LAWS

**PIIHONUA HAWAIIAN
HOMESTEAD COMMUNITY ASSOCIATION**
(A Hawaii nonprofit corporation)

AMENDED AND RESTATED
ARTICLES OF INCORPORATION
PIIHONUA HAWAIIAN
HOMESTEAD COMMUNITY ASSOCIATION
(A Hawaii nonprofit corporation)

ARTICLE I

CORPORATE NAME

The name of the Corporation will be Piihonua Hawaiian Homestead Community Association (referred to in these articles of incorporation as the "Corporation").

ARTICLE II

OFFICES; REGISTERED AGENT; INCORPORATORS

Section 2.1 Mailing Address of Principal Office. The mailing address of the Corporation's principal office is 37 Waiea Place, Hilo, Hawaii 96720.

Section 2.2 Registered Agent and Street Address For Service of Process. The Corporation shall have and continuously maintain in the State of Hawaii a registered agent who shall have a business address in this State. The agent may be an individual who resides in this State, or a domestic or foreign entity authorized to transact business in this State.

(1) The name of the Corporation's registered agent in the State of Hawaii is Ronald Kodani.

(2) The street address of the place of business of the person in the State of Hawaii to which service of process and other notice and documents being served on or sent to the entity represented by the person may be delivered to is 37 Waiea Place, Hilo, Hawaii 96720.

Section 2.3 Incorporators. The names and addresses of the incorporators are as follows:

Ronald Kodani, 37 Waiea Place, Hilo, Hawaii 96720.

Doreen Kodani, 37 Waiea Place, Hilo, Hawaii 96720.