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SECRETARY OF STATE TAIL AHASSEE, FLORED

J. BRYAN

JUN 28 2011

EXAMINER

COVER LETTER

TO:	Registration S Division of Co			
SUBJE	ECT:	MR ROBOTO	TOKOYO GRILL LLC	
50201			ited Liability Company	
The en	closed Articles o	of Amendment and fee(s) are su	bmitted for filing.	
Please	return all corresp	oondence concerning this matte	r to the following:	
			LASHELLE KEEL	
			Name of Person	
			Firm/Company	
			58 SIOUX CIRCLE	755
			HAVANA, FL 32333	22 P
	City/State and Zip Code ronbenfield@bellsouth.net			SEE FLOR
For fur	ther information	E-mail address: (concerning this matter, please	to be used for future annual report notification	on) OR OR OR
		SHELLE KEEL	at (9-5171
	Name	of Person	Area Code & Daytime Te	lephone Number
Enclose	ed is a check for	the following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tration Section ion of Corporations Box 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	DBOTO TOKOYO GRILL				
(Name of the Limited	Liability Company as it now appea A Florida Limited Liability Company)	rs on our records.)			
		4414010000			
The Articles of Organization for this Limited L	11/12/2009	and assigned			
Florida document number L0900010	<u>8990 </u>		30 ≠		
			E9 &		
This amendment is submitted to amend the foll	owing:		2 7		
A. If amending name, enter the new name o	f the limited liability company be	ra.			
A. If amending name, enter the new name of	r the named nationty company he	<u>re</u> .			
The new name must be distinguishable and end wi	th the words "I imited I inhility Comm	anu 21 tha designation	"I I C" of the behavior		
"L.L.C."	in the words. Elimited Liability Comp	any, the designation	ELC OF THE AUDITOR		
Enter new principal offices address, if applic	sa blar		ツ		
• •					
(Principal office address MUST BE A STREE	<u>ET ADDRESS)</u>				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>				
B. If amending the registered agent and/		our records, <u>enter</u>	the name of the new		
registered agent and/or the new registered or	<u>ffice address here</u> :				
Name of New Registered Agent:	LASHELLE KEEL				
New Registered Office Address:					
	Enter Florida street address . Florida				
	City		Zip Code		
Now Desistand Agent's Signature if shanging	Dogistavad Agants				

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager

MGRM = Managing Member **Title** Name <u>Address</u> Type of Action **MGRM** MING HING CHAN 1873 COPPER AXE TRAIL **✓** Add Remove TALLAHASSEE, FL 32303 KALING CHAN MGRM 1873 COPPER AXE TRAIL ✓ Add TALLAHASSEE, FL 32303 Remove ☐ Add ☐ Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) **JUNE 27** Dated __ Signature of a member or authorized representative of a member LASHELLE KEEL Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00