

L11000083677

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

APR 06 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DORAKU BRICKELL LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

AARON HYATT

Name of Person

DORAKU BRICKELL, LLC

Firm/Company

900 SOUTH MIAMI AVE. SUITE 133

Address

MIAMI, FL 33130

City/State and Zip Code

AHYATT@DORAKUSUSHI.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AARON HYATT

Name of Person

at (305)

373-4633

Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

Enclosed 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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2012

AARON HYATT
900 SOUTH MIAMI AVE. SUITE 133
MIAMI, FL 33130

SUBJECT: DORAKU BRICKELL LLC
Ref. Number: L11000083677

Please note the money amounts differ on the check. Please send a corrected check for the proper amount. The correct amount is \$55.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 112A00009153

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12 APR -5 AM 11:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DORAKU BRICKELL, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 07/20/2011 and assigned
Florida document number L11000083677.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

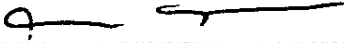
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	KEVIN AOKI	325 S. BISCAYNE BLVD. APT. 3919 MIAMI, FL. 33131	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	YASUSHI WATANABE	951 BRICKELL AVE MIAMI, FL. 33131	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated March 1, 2012

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA


Signature of a member or authorized representative of a member
Aaron Hyatt
Typed or printed name of signee