

L12000012047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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T. CLINE

FEB 17 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 9, 2012

MARIA GOMEZ  
5727 NW 7TH STREET, #225  
MIAMI, FL 33126

SUBJECT: ICHI, LLC  
Ref. Number: L12000012047

We have received your document for ICHI, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 112A00005725

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Ichi, 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:

\_\_\_\_\_  
Name of Person

Ichi, LLC  
\_\_\_\_\_  
Firm/Company

5727 NW 7th Street, #225  
\_\_\_\_\_  
Address

Miami FL 33126  
\_\_\_\_\_  
City/State and Zip Code

info@sehholdings.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person

Maria L. H. Gomez at ( 786 ) 728-1249  
Area Code & Daytime Telephone Number

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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

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

Ichi, 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 January 25th, 2012 and assigned Florida document number L12000012047.

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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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TALLAHASSEE, FLORIDA

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>  |
|--------------|-------------|---|--|
| MGR          | SEH, Corp.  | 5727 NW 7th Street, #225<br>Miami, FL 33126 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| MGRM         | SEH, Corp.  | 5727 NW 7th Street, #225<br>Miami, FL 33126 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |             |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |             |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |             |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |             |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

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 TALLAHASSEE, FLORIDA

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

\_\_\_\_\_

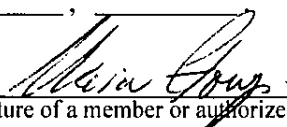
\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated \_\_\_\_\_,

  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member  
 Maria L. H. Gomez  
 \_\_\_\_\_  
 Typed or printed name of signee