

# L14000124743

Florida Department of State  
Division of Corporations  
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Fax Number : (850)617-6383

From: Account Name : ACCOUNT BOOKKEEPING CORP  
Account Number : I20120000055  
Phone : (407)898-1757  
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SUSHI I DRIVE LLC

|                       |         |
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| Certificate of Status | 0       |
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DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SUSHI I DRIVE 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:

**ANDREA PINE**

Name of Person

**ABK CORP**

Firm/Company

**3300 S HIAWASSEE DR STE 106**

Address

**ORLANDO, FL 32835**

City/State and Zip Code

**OPERATIONS@ABKCORP.COM**

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

For further information concerning this matter, please call:

**ANDREA PINE**

Name of Person

**407**

Area Code

**898-1757**

Daytime Telephone Number

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

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TALLAHASSEE, FL

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

**SUSHI I DRIVE 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 08/08/2014 and assigned  
Florida document number L14000124743

This amendment is submitted to amend the following:

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

**MILLENIA GRILL LLC**

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: 4104 MILLENIA BLVD  
ORLANDO, FL 32839  
*(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 605, 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:

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**If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:**

MGR = Manager  
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>              | <u>Address</u>                                   | <u>Type of Action</u>  |
|--------------|--------------------------|--|--|
| MBR          | LET'SUSHI LLC            |  | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| MGR          | VIEIRA, CELSO M          |  | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| MBR          | FERA LLC                 | 7061 GRAND NATIONAL DR #140<br>ORLANDO, FL 32819 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
| MGR          | CARAM, RAFAEL            | 3317 NEW GARDEN VIEW LANE<br>HOUSTON, TX 77018   | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
| MBR          | REFERUSA INVESTMENTS LLC | 7700 CYPRESS GROVE RD<br>ORLANDO, FL 32819       | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                          |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

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

Four horizontal lines for amending information.

E. Effective date, if other than the date of filing (optional)  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Date: NOVEMBER 11 2014

Signature of a member or authorized representative of a member  
*Eduardo Baptista*  
EDUARDO BAPTISTA  
Typed or printed name of filer

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