Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLACKLEDGER ENTITY MANAGEMENT LLC &

Account Number : 120150000089

Phone : (305)444-6800

Fax Number

: (305)444-4010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUSHI CLUB LLC

| Certificate of Status | 0 |
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| Page Count | 04 |
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(H20000 381 4403)

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(H20000 381 4403)

| Sushi Club LLC | | | |
|--|---|-------------------|---------------------|
| (Name of the Limited Liability (A Florida | y Company as it now appears on our records.) Limited Liability Company) | | |
| The Articles of Organization for this Limited Liability C | ompany were filed on October 21, 2020 | and assign | ed |
| | | | |
| | | | |
| A. If amending name, enter the new name of the limi | ited liability company here: | | |
| The new name wast be distinguishable and contain the words "Lim | ited Liability Company," the designation "LLC" or the abl | previation "L.L.C | * 15 |
| | | | |
| • • | of co | | |
| (Principal office address MUST BE A STREET ADDR | (23) | | |
| | | | |
| Enter new mailing address, if annlicable: | | | |
| • | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | |
| (Name of the Limited Liability Company at It gov aeritars of our textstea) The Articles of Organization for this Limited Liability Company were filed on October 21, 2020 and assigned Florida document number L200003124867 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 Enter Florida street address Enter Florida street address Limited Liability Company here City New Registered Agent's Signature, if changing Registered Agent: Limited Liability Company has been notified in writing of this change. | registered 20:30 NO: | | |
| | | , ; | |
| New Registered Office Address: Enter Florida street address | | <u></u> | |
| | | Zin Code | - 75 - 1 |
| | • | ZIP COCE | င်း |
| lew Registered Agent's Signature, if changing Registers | ed Agent: | • | |
| provisions of all statutes relative to the proper and to eccept the obligations of my position as registered a peing filed to merely reflect a change in the register | complete performance of my auties, und i um igent as provided for in Chapter 605, F.S. Oi red office address, I hereby confirm that the l | r, if this doct | ment is |
| | If Changing Registered Agent, Signature of New I | Registered Age | <u></u> |

305

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|---------------------------|-------------------------|----------------|
| MGR | Judith Martinez de Corres | 2320 Ponce de Leon Blvd | DAdd |
| | | Coral Gables FL 33134 | ■ Remove |
| | | 2320 Ponce de Leon Blvd | Change |
| MGR | Adolfo Correa Medina | Coral Gables FL 33134 | □Add |
| | | | ■ Remove |
| | | | □Change |
| | | | □Add |
| | | | □ Remove |
| | | | Change |
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| ote: If | e date, if other than the date of filing: | i.020 ed u |
| record s is filed | specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after. | r the |
| | 10/22/2020 | |
| ated | 1\$ H | |
| | | |
| | Signature of a member or authorized representative of a member | |