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SECRETARY OF STATE SALI AHASSEE, FLORIDA

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COVER LETTER

TO: Registration Division of C				
SUBJECT: Peter's	Sushi & Grill LLC			
	(Name of Lin	nited Liability Company)		
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.		
Please return all corres	pondence concerning this matter	r to the following:	·	
	Mang Inpadith	Olama of Parasa)		
		(Name of Person)		
		(Firm/Company)		OB MAY IN AM IO: 23 SECRETARY OF STATE TALLAHASSEE, FLORIDA
	7900 4th St N			
		(Address)		ASSET I
	St Petersburg, FL 33	3702		E OF
		(City/State and Zip Code)		STATE 27
For further information	concerning this matter, please of	eall:		Sm. m
Donna Gilbert		at (727) 823-3003		
(Nam	e of Person)	(Area Code & Daytime 1	Telephone Number)	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Sta Certified Copy (additional copy	atus &
	LING ADDRESS: stration Section	STREET/COURIER Registration Section	ADDRESS:	
Division of Corporations P.O.: Box 6327		Division of Corporation Clifton Building	ons	

Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Peter's Sushi and Grill 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 4/28/2008 and assigned
Florida document number <u>L08000042478</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
MANG'S SUSHI & GRILL LLC
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or Ra abbreviation "L.L.C." 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:

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

<u> </u>	Managing Member <u>Name</u>	Address	Type of Action
		11001 CO	Type of Action
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		r or authorized representative of a member	
	MANG INPADI	or printed name of signee	

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Filing Fee: \$25.00