## L08000075747

(Requestor's Name)				
(Address)				
(Audiess)				
(Address)				
•				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Dusings Fulik Nama)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



200137612732

11/07/08--01021--012 \*\*25.00

2000 NOV -7 AM IO: 41

C. LEWIS

NOV 1 0 2008

EXAMINER

## **COVER LETTER**

Division of Cor	rporations		
SURJECT: Shan K	ishi Japanese Hibad	chi. LLC	ū
SUBJECT.		ited Liability Company)	<u></u> u
	Amendment and fee(s) are sub	-	
riease return an correspo	ondence concerning this matter	to the following:	
	Bobbie Brigman		
		(Name of Person)	<del></del>
	Mastercraft Marketplace		
		(Firm/Company)	
		(Address)	
		(City/State and Zip Code)	
For further information of	concerning this matter, please c	all:	
Bobbie Brigman		at ( 850 ) 235-4033	
(Name	of Person)	(Area Code & Daytime T	'elephone Number)
Enclosed is a check for the	he 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:

TO:

**Registration Section** 

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

FILED 2008 NOV -7 AM 10: 41

Shan Kishi Japanese Hibachi, LLC

SEURLTARY OF STATE TALLAHASSEE, FLORIDA

(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 08/06/08	and assigned	
Florida document number L08000075747	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company here:		
The new name must be distinguishable and end with the wo	ords "Limited Liability Company," the desi	ignation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	**************************************		
(Principal office address MUST BE A STREET ADD	RESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	A		
B. If amending the registered agent and/or registered agent and/or the new registered office add		s, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
	(City)	lorida(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>Na</u>	ne	Address	Type of A	ction
MGRM Jun	Wei Li	16821 Panama City Beach Parkway Panama City Beach, FL 32413	Add Remove	
			Add Remove	
	·		Add Remove	
anguntum anguntum anguntum	······································		Add Remove	
			Add Remove	
			Add Remove	
D. If amending an	y other information, enter change(s	) here: (Attach additional sheets, if necessary.)		
		7	22	
Dated November	4 , 2008	LLAHASSE		T
<u></u>	Signature of a member or	authorized representative of a member	HA	
	Jun Wei Li Typed or	printed name of signee		

Page 2 of 2

Filing Fee: \$25.00