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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer	
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Office Use Only



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TO APR 12 AM 8: 39
SECRETARY OF STATE
SECRETARY OF STATE



J. BRYAN

APR 13 2009

EXAMINER

COVER LETTER

OLIN IN COM	Lulu's Asian Gri	II and Noodle Bar LLC		
SUBJECT:		ed Liability Company	 	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
		Steven E. McNeff		
	Name of Person			2g 6
	Lulu's As	ian Grill and Noodle Bar LLC		10 APR 12 AM 8: 39 SECRETARY OF STATE FAILLAHASSEE. FLORIDA
	Firm/Company			SSE 72
	3470 North Miami Avenue			E.F.S
		Address		- 39 - 39
	Miami, FL 33127			Direction of the second
		City/State and Zip Code		
	E-mail address: (i	Albany154@aol.com o be used for future annual report notifica	tion)	
For further information	concerning this matter, please c	all:		
SIEUEA Name	M = NEFF of Person	at (<u>305)</u> <u>573 - 8</u> Area Code & Daytime T	P700 Telephone Number	
Enclosed is a check for	_	_		_
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
	NG LDDDDGG	CAD DE CADALINA	o a diducce	

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 30, 2010

STEVEN E. MCNEFF LULU'S ASIAN GRILL AND NOODLE BAR LLC 3470 NORTH MIAMI AVENUE MIAMI, FL 33127

SUBJECT: LULU'S ASIAN GRILL AND NOODLE BAR LLC

Ref. Number: L09000092107



We have received your document for LULU'S ASIAN GRILL AND NOODLE BAR LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 710A00007777

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ny as it now appears on our records Liability Company)	<u>.</u>) ·
y were filed on09/23/2009	
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IA LLC	59-5 7
nited Liability Company," the designati	SER N
3470 North Miami Avenue	門母王
Upper Suite	F. C. S.
Miami, FL 33127	9
ffice address on our records, <u>en</u> re:	ter the name of the new
Enter Florida stree	t arhiress
, Florid , Florid	a Zip Code
	In as it now appears on our records Liability Company) y were filed on

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 on Managing Member being added or removed from our records:

MGR = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
	<u> </u>		Add Remove
			Add Remove
	<u> </u>		, present 1
·			Add Remove
			Add Remove
D. If amend	ing any other information, enter chang	e(s) here: (Anach additional sheets, if necessor	FILED 10 APR 12 AM 8: 39 SECRETARY OF STATE FALLAMASSEE, PLOPROA
Dated	17 ((*))	or authorized representative of a member EN-ZON or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00