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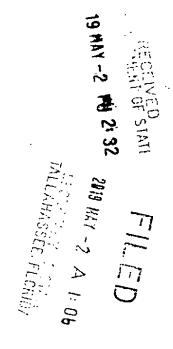
(Requestor's Name)
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COVER LETTER

TO:	Registration Se Division of Cor		र्गः			
	MR ROBO	TO TOKYO GRILL LLC				
SUBJI	ECT:	Name of Limi	ited Liability Company			
The en	nclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		JEFF CHAN				
		ROBOTO TOKYO GRILI	Name of Person			
Firm/Company 1873 COPPER AXE TRAIL						
Address TALLAHASSEE, FL 32303						
		City/State and Zip Code JEFFCHAN850@GMAIL.COM				
For fu	rther information c	E-mail address: (to oncerning this matter, please ca	to be used for future annual report notifica	tion) LAHAY -		
JEFF	CHAN		407 925-4391	m- 💝		
	Name o	f Person	at () Area Code Daytime To	elephone Number	Ü	
Enclos	sed is a check for th	ne following amount:				
■ \$2	5.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MR ROBOTO TOKYO GRILL LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned Florida document number _____ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ROBOTO TOKYO GRILL TENNESSEE LLC 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 pame of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:

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

Enter Florida street address

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
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				Change
				Remove
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			.	🗆 Add
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			-2 A	□ Remove
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The 90th day after the record is filed. April 29th 2019	
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Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00