

### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Fax Number

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

: (407)671~4352

Email Address:

#### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KOBE SUSHI & GRILL, LLC.

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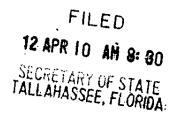
Help

#### **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Kobe Sushi & Grili, LLC			
(Name of Lim	nited Liability Company)		
The enclosed member, managing member or filling.	r manager resignation and fee(s) are submitted	for	
Please return all correspondence concerning	this matter to:		
Rachel Siu			
(Contact Person)			
Siu & Zanowick, CPAs			
(Firm/Company)			
5100 Old Howell Branch Road			
(Address)			
Winter Park, FL 32792			
(City/State and Zip Code)			
For further information concerning this matt	er, please call:		
Rachel Siu	at (407) 679-2433 (Area Code & Daytime Telephone Number)	•	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable t	to the Florida Department of State for:		
<b>*</b> ***********************************	Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations P.O. Box 6327		
Clifton Building 2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301	ranginassos, riprida 22017		

CR2E079-(5/06)





## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

# RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LLABILITY COMPANY

	nited liability company as it Sushi & Grill, LLC	appears on the records	of the Florida Department
2. This limited liability Florida	by company was organized u	nder the laws of:	
3. The Florida docum L100001077	ent/registration number of the 74	nis limited liability com —	ipany is:
<sub>4. I,</sub> Qing Jin Lu		, hereby resign as a	MGRM
•	e of rerson kesigning) ity company and affirm the !		(Print Title)
Signature of Resign	ing Member, Managing Me	mber or Manager	·
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		