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EXAMINER



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COVER LETTER

TO: Registration Secti Division of Corpo		***	
SUBJECT: Sum	O Sushi Sa Name of Limit	KC, LLC ed Liability Company	
The enclosed Articles of An	nendment and fee(s) are sub-	mitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
	M	Mars of Person	
	Mi	Mi S. Wolok, 1 Firm/Company	^A
	1248 Frank	Whiteman Blud Address	
	Naples F	EL 34103 City/State and Zip Code	
	Mikeyza E-mail@ddress: (to	k @ hot no. 1. com o be used for future annual report notificati	on)
For further information cond	cerning this matter, please ca	all:	
Name of P	No lokerson	at (<u>239) 403 - 9 99</u> Area Code & Daytime To	elephone Number
Enclosed is a check for the	following amount:		
2 \$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:

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

Sumo Sushi Sake (Name of the Limited Liability (A Florida)	2, LLC		
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears of Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability C	Company were filed on <u>11/2</u>	v7/12 =	ınd assigned
Florida document number <u>L1200014796</u> [•	
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the lim</u>	ited liability company here:		
The new name must be distinguishable and end with the wor'L.L.C."	rds "Limited Liability Company,	"the designation "LLC"	or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDI	RESS)		
			73
		\$ \text{\$\times\$}	**************************************
Enter new mailing address, if applicable:		<u> </u>	70 27329
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	77	
		<u> </u>	
	•		£-
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		records, enter the n	ame of the new
Name of New Registered Agent:			
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	·	
	Enter	Florida street address	
·		, Florida	
	City		p 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 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>Name</u> Address Type of Action 20041 TamianiTrail South MAdd mG RM Bigeye, LLC Unit 15 Estero FL 33928 Remove MGRM Bluefin Lessing, LLC 161 Mahagany Drive Add Naple 1 FL 341 108 1 Remove Remove Remove

D.	If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
		•
	•	
	•	
Dat	ted	Dec. 18, 2012.
		Signature of a member or authorized representative of a member
		Min's Nolah, Esq., FBN 196444 Typed or printed name of signer
		Typed of printed fiame of signet

Page 3 of 3

Filing Fee: \$25.00