# L130000000383

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(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
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SECRETARY OF STATE
DIVISION OF CORPERATIONS

C. LEWIS
JAN 1 1 2013
EXAMINER

## **COVER LETTER**

ΓΟ: Registration Section ** Division of Corporations
SUBJECT: Satini Sushi & Grill LLC
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Phuong Chu Name of Person
Firm/Company
10225 Caroline Park DR
Orlando, FL 32832 City/State and Zip Code
alina 2000 @ att. net  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Phuong Chu at (407) 616-2129  Area Code & Daytime Telephone Number
•
Enclosed is a check for the following amount:
Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  S55.00 Filing Fee & S60.00 Filing Fee, 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

ずに起い SECRETARY OF TAFE DIVISION OF GOREGEATION

2013 JAN 10 AM 8: 49

Satini Sushi a	+ Grill LL	_C
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears ited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Comp.  Florida document number	pany were filed on	02/2013 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here	:
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Compan	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	<del> </del>	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ur records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	City	, Florida 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 Title Name Address Type of Action Phyong Chu Phuong Chu Remove ☐ Add Remove ☐ Add Remove ∏ Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member huona Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00