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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Kiku Japanese Fusion II 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:

Zugui Wang  
Name of Person

Kiku Japanese Fusion II LLC  
Firm/Company

800 Ocala Rd Ste #370  
Address

Tallahassee, FL 32304  
City/State and Zip Code

Kiku.fusion02@gmail.com  
E-mail address: (to be used for future Annual report notification)

For further information concerning this matter, please call:

Zugui Wang at (850) 575 5458  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$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

K'eku Japanese Fusion II LLC

The Articles of Organization for this Limited Liability Company were filed on 9/18/2013 and assigned Florida document number L13000132540.

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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>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	SHAM FAI KWOK	<del>800 Ocala Rd Ste #370</del>	<input type="checkbox"/> Add
		800 Ocala Rd Ste #370, Tallahassee, FL 32304	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Dejin Wang	800 Ocala Rd Ste #370 Tallahassee, FL 32304	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Meidan Lin	800 Ocala Rd Ste #370 Tallahassee, FL 32304	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
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Dated 8/23/17, \_\_\_\_\_

Signature of a member or authorized representative of a member

Zugui Wang  
Typed or printed name of signee