

**L14000096380**

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 SEP -5 P 2:04

**FILED**

**S Warren**

**SEP 07 2016**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Oishi Thai Restaurant And Sushi Bar 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:

Pinnasit Tuntikul  
Name of Person

Oishi Thai Restaurant And Sushi Bar II LLC  
Firm/Company

5614 Lilly St.  
Address

Panama City, FL 32404  
City/State and Zip Code

Mini-julie1@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pinnasit Tuntikul at (850) 747-0052  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

Oishi Thai Restaurant And Sushi Bar II LLC.

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/16/2014 and assigned Florida document number 2 14000092380.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Oishi Thai Restaurant And Sushi Bar II LLC.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5614 Lilly St  
Panama City  
FL 32404

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5614 Lilly St  
Panama City  
FL 32404

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Pinnasit

Tuntit

New Registered Office Address:

5614 Lilly St

Enter Florida street address

Panama City  
City

Florida

32404  
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 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.

Pinnasit Tuntit

If Changing Registered Agent, Signature of New Registered Agent

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>
MGR	Pinnasit Tantikul	5614 Lilly St	<input checked="" type="checkbox"/> Add
		Panama City	<input type="checkbox"/> Remove
		FL 32404	<input type="checkbox"/> Change
AMBR	Paniti Tantikul	5614 Lilly St	<input checked="" type="checkbox"/> Add
		Panama City	<input type="checkbox"/> Remove
		FL 32404	<input type="checkbox"/> Change
AMBR	Julie Orisomphon	5614 Lilly St	<input checked="" type="checkbox"/> Add
		Panama City	<input type="checkbox"/> Remove
		FL 32404	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Saisanee Sarnnuk		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 CLERK OF STATE  
 PANAMA CITY, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Change New Owner

From  
TO

Sriwanee  
Pinnasit

Sannok  
Tuntikul

Document Number

L 14000096380

FBI/EIN Number

47-1116037

E. Effective date, if other than the date of filing: 09/01/2016 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated

09/01/2016

8:00 AM

Pinnasit Tuntikul

Signature of a member or authorized representative of a member

PINNASIT

TUNTIKUL

Typed or printed name of signer

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2016 SEP 01 PM 2:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA