

U8000017539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

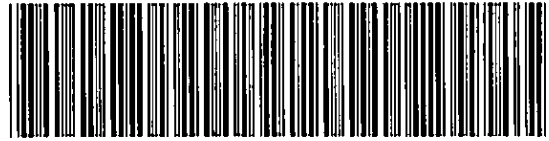
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 JUL -2 AM 11:42

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JUL 06 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ULTIMATE SUSHI LLC  
Name of Limited Liability Company

PLEASE SEND ARTICLES OF AMENDMENT

The enclosed Articles of Amendment and fee(s) are submitted for filing.

TO: JACK KWON

Please return all correspondence concerning this matter to the following:

469 LAKE ROAD,

LAKE MARY, FL 32746

JACK KWON

Name of Person

Firm/Company

469 LAKE ROAD

Address

LAKE MARY, FL 32746

City/State and Zip Code

JKKWON0726@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JACK KWON

Name of Person

at ( 407 )

Area Code

474-2454

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

ULTIMATE SUSHI 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 01/19/2018 and assigned  
Florida document number L18000017539.

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 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

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 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.*

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	HETUAN CHEN	1950 SAN MARCO BLVD., SUITE 1	<input checked="" type="checkbox"/> Add
		JACKSONVILLE, FL 32207	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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N/A

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DIVISION OF INVESTIGATION  
18 JUL -2 AM 11:42

**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.

Dated           JUNE 21          , 2018

\_\_\_\_\_  
Typed or printed name of signer