**Division of Corporations Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017 Phone : (855) 498-5500 Fax Number : (800) 432-3622

\*\*Enter the email address for this business entity to be used for future \_\_\_\_\_ annual report mailings. Enter only one email address please.\*\*

Email Address:

AUG - 1

RECEIVED

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUZAKU, LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu K. SALY Help

## **COVER LETTER**

TO:	Registration Sec Division of Corp					
CHBIE	SUZAKU,	LLC				
SUBJECT:Name of Limited Liability Company						
The enc	losed Articles of	Amendment and fec(s) are sub-	niued for filing.			
		ndence concerning this matter t				
		Benjamin Hedrick				
		<del></del>	Name of Person			
		Akerman, LLP				
			Firm/Company	<del></del>		
		98 SE 7th Street, Suite 110	0			
	Address					
Miami, FL 33131						
			City/State and Zip Code			
		benjamin.hedrick@akerman				
		E-mail address: (	o be used for future annual report	notification)		
For furt	her information o	onceming this matter, please ca	d):			
Benjamin Hedrick		305 982-566	4			
	Name o	f Person	at () Area Code Da	ytime Telephone Number		
1°=1	ad ia a abaada sias s	he following amount:				
	6.00 Filing Fee	S30.00 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)		
		ING ADDRESS:	STREET/CO Registration S	OURIER ADDRESS:		
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division of Co Clifton Buildi	orporations			
		2661 Executive Center Circle				

Tallahassec, FL 32301

Taylor Seay 8004323622

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

(04/06) 08/01/2019 08:23:03 AM 29839 3 19 AUG - AM 9,5=

<u></u>	
ny as it now appears on our records.) iability Company)	
were filed on 06/03/2019 and assigned	
ility company here:	
hty Company," the designation "LLC" or the abbreviation "L.L.C."	
201 S. Biscayne Blvd.	
Office No. 2845	
Miami, FI. 33131	
201 S. Biscayne Blvd.	
Office No. 2845	
Miami, FL 33131	
ffice address on our records, enter the name of the	
Enter Florida street address	
, Florida	
City , Florida Zip Code	
<u>j</u>	

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

Page 1 of 3

## 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>	Name	Address	Type of Action
AMBR	TAMASHI, LLC	201 S. Biscayne Blvd.	
		Office No. 2845	
		Miami, FL 33131	Remove
P	URCOLA, ALVARO	201 S. Biscayne Blvd.	Change
		Office No. 2845	Add
		Miami, FL 33131	□ Remove
<u>s</u>	DIAZ, CARLOS	201 S. Biscayne Blvd.	Change T
		Office No. 2845	■ Aug.
		Miami, FL 33131	□ Remove 9
AR	APARICIO, JOSE ANTONIO	201 S. Biscayne Blvd.	B change
		Office No. 2845	□ Remove
		Miami, FL 33131	□ Change
AR	SOLER, ROCIO	201 S. Biscayne Blvd.	
		Office No. 2845	Remove
		Miami, FL 33131	Change
			□ Remove
			Change

Page 2 of 3

D. If amending any other info	mation, enter change(s) here: (Attach additional sheets, if ne	ecessary.)
		<u> </u>
<u> </u>		<del></del>
		19 A
		= = = = = = = = = = = = = = = = = = =
		<del></del>
Note: If the date inserted in the	the date of filling:  to must be specific and cannot be prior to date of filing or more than 90 days a six block does not meet the applicable statutory filing requirements, are Department of State's records.	ptional)  ther filing.) Pursuant to 605.0207 (3)(h) this date will not be listed as the
If the record specifies a del (b) The 90th day after the	ayed effective date, but not an effective time, at 12:0 record is filed.	1 a.m. on the earlier of:
Dated July 31	. 2019	
/s/ Carlos Franci	co Olaz Bacallado Signature of a member or authorized representative of a member	
Carlos Francisco I		
	Typed or printed name of signee	

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Filing Fee: \$25.00