<del></del>		
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bi	usiness Entity Name)	
(==	,,	
(D)	ocument Number)	
(DC	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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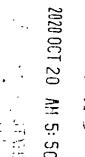
Office Use Only

J. FASON NOV 03 2020



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# COVER LETTER

<b>TO:</b> New Filing Son Division of C				
SUSHI Y	'AMA JAPANESE REST	AURANT LLC		
SUBJECT: SUSHI Y		ulting Florida Limit	ed Com	pany)
The enclosed Article Business Entity" into	s of Conversion, Artic a "Florida Limited Li	les of Organization ability Company	on, and " in ac	d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all corr	espondence concerning	g this matter to:		
ROBERT SALINAS				
	(Contact Person)			
REALITY CHECK BUS	SINESS SOLUTIONS LL	.c		
	(Firm/Company)			
5301 TAYLOR ST				
	(Address)			
HOLLYWOOD, FL, 33	021			
	City, State and Zip Code)			
rsalinas@rcbs.biz	•			
E-mail Address: (to b	e used for future annual re	port notifications)		
	on concerning this ma			
ROBERT SALINAS		at ( <u>786</u>	338-9	0000
(Name of Conta	ct Person)	(Area Code)	(Dayı	time Telephone Number)
Enclosed is a check t dollars and drawn on	or the following amou a bank located in the	nt: (All checks p United States)	rocess	ed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	S180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add New Filing S Division of C P.O. Box 632	ection orporations		New F Divisi	Address: Filing Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite \$10

Tallahassee, FL 32303

Tallahassee, FL 32314

#### Articles of Conversion

For

#### "Other Business Entity"

Into

### Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: SUSHI YAMA JAPANESE RESTAURANT INC
(Enter Name of Other Business Entity)
CORPORATION
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
05/09/1997
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SUSHI YAMA JAPANESE RESTAURANT LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:  (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.)  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.
5. The plan of conversion has been approved in accordance with all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.
五 2

Signed this 9TH day of OCTOBER	20
Signature of Authorized Representative of Limi	ted Liability Company:
<u></u>	
Signature of Authorized Representative:	
Printed Name: ROBERT SALINAS	Title: CONTROLLER
Printed Name. Hobert Ortentio	
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)]
Signature:	
Signature:	DELECTORAL
Printed Name: TOSHIO FURIHATA	Title: PHESIDENT
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
111110011111111	
Signature:	
Printed Name:	Title:
Timed Name.	
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	OSE :
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
v	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	<del></del>
51g/mtm.es 01 <u></u> 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
All others:	
Signature of an authorized person.	
orgination of an about of the pro-	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
	\$30.00 (Optional)
Certified Copy:	\$5.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nai			
The name of the L	imited Liability Company	18:	
SUSHI YAMA JAPA	NESE RESTAURANT LLC		
(M)	ust contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ac	ldress:	1 Company is:	
The mailing address	ss and street address of the	principal office of the Limited Liability Company is:	
D. to signal Office /	A ddwoce	Mailing Address:	
Principal Office A	Aduress.	Manning Francisco	
1448 WASHINGTO	N AVE	7234 BISCAYNE BLVD	
MIAMI BEACH, FL		MIAMI, FL 33138	
ARTICLE III - R	legistered Agent, Registe	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another	
(The Limited Liability C husiness entity with an	company cannot serve as its own Reactive Florida registration.)	rgistered Agent. For must designate air motivodal or anomin	
		the self-continue.	
The name and the	Florida street address of the	le registered agent arc.	
	ROBERT SALINAS		
		ame	
	19452 NE 26TH AVE, APT		
	Florida street address (P.O. Box NOT acceptable)		
	MIAMI	FL 33180	
	City	Zip	
	City		
liability comp registered agent stantos relatin	oany at the place designate and agree to act in this cap a to the proper and comple	d to accept service of process for the above stated limited in this certificate. I hereby accept the appointment as pacity. I further agree to comply with the provisions of a te performance of my duties, and I am familiar with and	
accept the ob	oligations of my position as	registered agent as provided for in Chapter 605, F.S.	
	/		
	Registered Agent's S	Signature (REQUIRED)	

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager MOSHI MOSHI HOLDINGS LLC AMBR \_\_\_\_\_ 7234 BISCAYNE BLVD MIAMI, FL, 33138

(Use attachment if necessary) ARTICLE V: Other provisions, if any.

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

TOSHIO FURIHATA

REQUIRED SIGNATURE:

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)