L20000356270

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TO:

P.O. Box 6327

Tallahassee, FL 32314

	egistration Se ivision of Cor			
	RUNWAY	SUSHILLC	\	
SUBJECT	:	Name of Lim	ited Liability Company	
The analog	ad Amiolog of	A mandment and frace) are sub-	mitted for filing	
		Amendment and fee(s) are sub		
riease retu	пі ан соггеѕро	ndence concerning this matter	to the following.	
		SORNMONGKON LIKH	ITVORAWAT	
			Name of Person	
		RUNWAY SUSHI LLC		
			Firm/Company	
		17630 COLLINS AVE		
			Address	
		SUNNY ISLES BEACH, I	FL 33160	
			City/State and Zip Code	<u>.</u>
		TAKOSUSHI21@GMAIL.	COM to be used for future annual report notifica	dian't
lion fombon	information a			mon)
		oncerning this matter, please ca		
SORNMONGKON LIKHITVORAWAT			305 974-0335 at ()	
	Name of	f Person	Area Code Daytime T	elephone Number
Enclosed is	s a check for th	ne 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)
	lailing Addres egistration S		Street Address: Registration Section	on
Division of Corporations			Division of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2021 OCT -8 PH 2: 17

SECRETARY OF STATE TALLAMASSEE, FL

RUNWAY SUSHILLC

(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 of Elorida document number 1.20000356270	were filed on NOV 10, 202	20 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili	ty 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 at agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records, <u>e</u> i	iter the name of the new registered	
New Registered Office Address:	Enter Florida street a	ldress	
		, Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my dutie. rovided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is	

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>	Address	Type of Action
AMBR	NARUEMOL KANJANARITTHAK (RN	1000 PARKVIEW DR, APT 517	= Add
		HALLANDALE, FL 33009	□Remove
			□Change
AMBR SOF	SORNMONGKON LIKHITVORAWAT	1000 PARKVIEW DR, APT 517	□Add
		HALLANDALE, FL 33009	□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (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. SEPTEMBER 15 Signature of a member or authorized representative of a member SORNMONGKON LIKHITVORAWAT Typed or printed name of signee