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## **COVER LETTER**

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SUBJEC	·T·	ICHIB	AN B	UFFET LAKELAND LLC						
JODJIC	- • • •			Name of Lin	nited Liability Company					
The enclo	osed	Article	s of A	mendment and fee(s) are sub	omitted for filing.					
Please ret	turn .	all corr	espond	dence concerning this matter	to the following:					
				ANDY B LAI, CPA						
					Name of Person					
				LAI & COMPANY CPA,	PLLC					
					Firm/Company					
				7850 ULMERTON RD ST	ГЕ 7А					
					Address					
				LARGO, FL 33771						
					City/State and Zip Code	<del></del> ·	<del></del>			
				ANDYLAI@LAICOCPA.						
For furthe	er inf	ormatic	on con	E-mail address: ( cerning this matter, please c	to be used for future annual	report notification)		TAL MO38	2021 SI	- "}
_	A	ndy	le of Po	A	at ( <u>727</u> )	592-06	78	LAHA	<u> </u>	
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				following amount:				<u> </u>	00	
\$25.00	0 Fil	ing Fee		☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc		\$60,00 Fili Certificate Certified ( (additional c	of Status Copy		

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ICHIBAN BUFFET LAKELAND			
(Name of the Lim	ted Liability Company as (A Florida Limited Liabili	it now appears on our records.) y Company)	
The Articles of Organization for this Limited L	liability Company were	filed on 01/06/2021	and assigned
Florida document number L21000019530	<u> </u>		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability of	ompany here:	
The new name must be distinguishable and contain the v	words "Limited Liability Co	mpany," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applied	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		_
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	SOI E Mermor Lake land, FL	ial Blud 3380/
B. If amending the registered agent and/or ragent and/or the new registered office address	egistered office addresss here:	ss on our records, enter the nan	1e of the new registered
Name of New Registered Agent:	SHOUJIAO QIU		S
New Registered Office Address:	1830 IBIS BAY CT		
		Enter Florida street address	
	OCOEE	Florida	761
	C	Įt,	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.

Shon jiao Qin

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

Title	<u>Name</u>	Address	Type of Action
MGR	CHEN, FENG	1830 IBIS BAY CT.	□Add
		OCOEE, FL 34761	■Remove
		<del></del>	□Change
MGR	LIN. QINGZI	3290 MOUNT VERNON WAY	🗆 Add
		KISSIMMEE, FL 34741	<b>■</b> Remove
			(☐Change
			□Add
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Filing Fee: \$25.00