→ 18506176381 Division of Corporations

⊕ 01/27/2021 8:53 AM 1/27/2021

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To:

Division of Corporations

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From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940

Fax Number : (\$16)935-3088

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

Email Address: LBOCPA@LBOCPA.COM

## FLORIDA LIMITED LIABILITY CO. SUSHI BY BOU BEACH CLUB, LLC

Certificate of Status	1
Certified Copy	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

→ 18506176381

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

SUSHI BY BOU BEACH CLUB, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Malling Address:

101 N RIVERSIDE DR #205 POMPANO BEACH, FL 33062 101 N RIVERSIDE DR #205 POMPANO BEACH, FL 33062

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

TIFFANY J EATON ESQ

Name

LIQUOR AND LICENSING LAW FIRM INC 110 E BROWARD BLVD STE 1700

Florida street address (P.O. Box NOT acceptable)

FT LAUDERDALE

FI. 33301

City

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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

egistered Agent' Signature (REQUIRED)

TIFRANY JEATON ESQ

(CONTINUED)

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## H21000036783

Title:	Name and Address:
AMBR" = Authorized Member	
'MGR" = Manager AMBR	BRANDON FREID
	101 N RIVERSIDE DR #205
	POMPANO BEACH, FL 33062
•	date of filing: .(OPTIONAL)
(Use attachment if necessary)  EV: Effective date, if other than the ctive date is listed, the date must of filing.)	date of filing: (OPTIONAL)  De specific and cannot be more than five business days prior to or 90
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E V: Effective date, if other than the crive date is listed, the date must of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:	a member or an authorized representative of a member.
E V: Effective date, if other than the crive date is listed, the date must of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of the accordance with seconds.	a member or an authorized representative of a member.
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