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COVER LETTER

TO: Registration Section

Division of Cor	porations		
	BACHI EXPRESS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	VAN HENG HO		
		Name of Person	
		Firm/Company	
	6975 66TH ST N		
		Address	
	PINELLAS PARK, FL 33	781	
		City/State and Zip Code	
	OHTHNAH@GMAIL.CO	M to be used for future annual report notif	N
Dan Carlon laterania		•	acatom
ror turtner information c	oncerning this matter, please c	au:	
VAN HENG HO		727 6985939 at ()	
Name o	f Person	at () Area Code ——Daytim	e Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration 5 Division of C	Section orporations	<u>Street Address:</u> Registration Sec Division of Cor	porations
P.O. Box 632 Tallahassee, I		The Centre of T 2415 N. Monroo Tallahassee, FL	2 Street, Suite 810

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

SUMO HIBACHI EXPRESS LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited 1	павину Сошраву)			
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.21000140784}{1.21000140784}$.	were filed on 03/25/2021	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	lity 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 a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>er</u>	12 PH 4:		
New Registered Office Address:	Enter Florida street address			
	City	, Florida 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				

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. Thereby confirm that the limited liability company has been notified in writing of this change.

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
AMBR	HO, VAN HONG	6975 66TH ST N	■Add
		PINELLAS PARK, FL 33781	□Remove
MGR	HO, HANH	6975 66TH ST N	□Add
		PINELLAS PARK, FL 33781	Remove
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cord specifies a delayed effective data filed.	e, but not an effec	tive time, at 12	UT a.m. on the ear	tier of: (b)	ine 90th	i day after th
AUGUST 9	. 2021	·				
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Filing Fee: \$25.00