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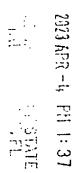
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| Special Instructions to | Filing Officer: | |
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| Division of Cor | | | | | | |
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| | CEFOUR LLC | | | | | |
| SUBJECT: | Name of Lim | | | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | | | |
| | ondence concerning this matter | _ | | | | |
| | KETUT SUWITRA | | | | | |
| | | Name of Person | | | | |
| | Shoyu Hibachi Express & | Poke Bowl | | | | |
| | | Firm/Company | | | | |
| | 2710 Park Place Blvd Apt | 4 | | | | |
| | | Address | | | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | |
| | Melbourne/Florida 32935 | | | | | |
| | | | | | | |
| | shoyuch@gmail.com | | ···· | | | |
| For further information of | encerning this matter, please c | to be used for future annual report notif all: | ication) | 2023 | | |
| Ketut Suwitra | | 330 242 6060 | | 2023 APR - | · · · · · · · · · · · · · · · · · · · | |
| Name of | of Person | Area Code Daytime | Telephone Number | *>= | , , | |
| Enclosed is a check for the | he following amount: | | | PH 1: 37 | ر دور رئین | |
| ■ \$25,00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Fiting Fee & Certified Copy (additional copy is enclosed) | Certified | ling Fee, te of Status & | | |
| Mailing Address Registration | | Street Address: Registration Sec | etion | | | |

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

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**

PARKPLACEFOUR LLC

| (A Florida Limited | Elability Company) | <u>ds.</u>) | | |
|---|---|--|------------------|---------------------------|
| The Articles of Organization for this Limited Liability Compan | y were filed on July 7, 2021 | ar | nd assig | ned |
| Florida document number L21000310415 | | | | |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the limited lia | bility company here: | | | |
| The new name must be distinguishable and contain the words "Limited Liab | oility Company," the designation "LLC | C" or the abbreviati | on "L.L. | C." |
| Enter new principal offices address, if applicable: | | | | |
| (Principal office address MUST BE A STREET ADDRESS) | | ;;; | 923 | |
| | | | C C | 1 1 |
| | | | <u></u> | |
| Enter new mailing address, if applicable: | | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | <u></u> | _ _ | ۱۰۰۰. م <u>ندر ۱</u> ۰ |
| | | 프 | င်း | registere |
| | | Lu: | ~ | |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: | address on our records, <u>ente</u> | r the name of th | ie new | <u>registered</u> |
| New Registered Office Address: | | | | |
| the registered office reduces. | Enter Florida street addre | .22 | | |
| | , F | Torida | | |
| | City | Zip | Code | |
| New Registered Agent's Signature, if changing Registered Agen | <u>t:</u> | | | |
| I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change. | e performance of my duties, a provided for in Chapter 605, | ind I am familic , F.S. Or, if this | ir with docun | and tent 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 |
|--------------|-------------|-----------------------------|--|
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| ffective date, if other an effective date is listed, to some 1f the date inserted occument's effective date. | he date must be spo I in this block do | ecific and cannot be es not meet the : | e prior to date of fi applicable statut | iling or more than ory filing requi | (option 190 days after fi rements, this o | ilino i Purs | uant to 60 not be lis | J5.020 sted a: |
| record specifies a delayon is filed. | ed effective date. | but not an effec | tive time, at 12: | 01 a.m. on the | earlier of: (b) | The 90th | h day afi | er the |
| , March 30 | | 2023 | | | | ÷ . | 202 | |
| ated | | | · | | | ; = . | 1023 APR | ۲ |
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Filing Fee: \$25.00