

L 21000506566

Florida Department of State
Division of Corporations
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To:

Division of Corporations
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From:

Account Name : TAX HOUSE LLP
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: state@taxhouse.us

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JAPAN RESTAURANT CORAL GABLES LLC

Certificate of Status	1
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FL21000506566

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JAPAN RESTAURANT CORAL GABLES LLC

(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 were filed on 11/29/2021 and assigned
Florida document number L21000506566.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SU CORAL GABLES LLC

The new name must be distinguishable and contain the words "Limited Liability 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**)

2881 PONCE DE LEON BLVD

CORAL GABLES, FL 33134

2121

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

2881 PONCE DE LEON BLVD

CORAL GABLES, FL 33134

921

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

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 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.

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>	<u>Address</u>	<u>Type of Action</u>
MGR/AP	GABRIEL D ABRAO	2851 PONCE DE LEON BLVD	<input type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AP	CARLOS E GONCALVES	3700 ISLAND BLVD #206	<input type="checkbox"/> Add
		AVENTURA, FL 33160	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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