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22 FEB 19 FH 3: 50

T. MATTHEWS FEB 28 2022

COVER LETTER

Division of Corpo	porations	
SUBJECT: 112 SUSHLL	LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.	
Please return all correspond	ndence concerning this matter to the following:	
	GEORGE E. McARDLE	
	Name of Person	
	McARDLE PEREZ & FRANCO PL	
	Firm/Company	
	255 ALHAMBRA CIRCLE, SUITE 925	
	Address	
	CORAL GABLES, FL 33134	
	City/State and Zip Code	
	GMCARDLE@MCPER.COM	
	E-mail address: (to be used for future annual report notification)	
For further information cor	oncerning this matter, please call:	
KAT HURTADO	Person at () Area Code Daytime Telephone Number	
Name of I	Person Area Code Daytime Telephone Number	_
Enclosed is a check for the	e following amount:	
		,
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee &	Status &
Mailing Address:	s: Street Address:	

TO:

Registration Section

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

22 FED IR FH 3: 50

112 SUSHI LLC	
(Name of the Limited Liability Company as it now appears on our reco (A Florida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company were filed on 12/22/2021 Florida document number L22000002018	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L	LC" 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 address on our records, entagent and/or the new registered office address here:	er the name of the new register
Name of New Registered Agent:	

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.

City

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
MGR	MARC SCHWARZBERG	255 ALHAMBRA CIRCLE, SUITE 925	🗆 🗆 Add
		CORAL GABLES, FL 33134	≅ Remove
			□Change
MGR	JOSE ORTEGA	255 ALHAMBRA CIRCLE, SUITE 925	□Add
		CORAL GABLES, FL 33134	■Remove
			Change
MGR	SK F&B LLC	112 ALHAMBRA CIRCLE, SUITE 102	\ 🗏 Add
		CORAL GABLES, FL 33134	□Remove
			□Add
			□Remove
			Change
			□Add
			Remove
		 	□Add
			□Remove
			□ Channa

·	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
	
14016: 11 1	date, if other than the date of filing:
record sp d is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	ruary 17 2022
	M < l.
	Signature of a member of authorized representative of a member
	Marc Schwarzberg

Filing Fee: \$25.00