L 2 2 0 0 0 0 2 3 4 1 8

(0.		
(∺€	equestor's Name)	
	_	
(Ac	ldress)	
(Ac	idress)	
(Cit	ty/State/Zip/Phone #	<u> </u>
(OII	tyrotaterziph hone m	,
PICK-UP	☐ WAIT	MAIL
	ısiness Entity Name)	<u> </u>
(= -	, ,	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
0	Ellis - Office	
Special Instructions to	Filing Officer:	

Office Use Only



500421881805

01/19/24--01016--008 **25.00

2009 JAH 19 PH 2:31 SECRIFY A CHESTAN

COVER LETTER

TO: Registration So Division of Cor			
	PACE DOGWOOD 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	ondence concerning this matter	to the following:	
	UR	RSULA PINHO WILLIAMS	
		Name of Person	
	NIKK	O OF PACE DOGWOOD LLC	
Firm/Company			
	50	828 DOGWOOD DRIVE	20 2
		Address	ALC AL
	MI	LTON FLORIDA 32570	2024 JAH 19 PH SECRETA VILLA TALLAH SAS
		City/State and Zip Code	
	r	glazet 157@gmail.com	
		to be used for future annual report not	ification) $\frac{3}{2}$ $\frac{2}{2}$ $\frac{2}{2}$
For further information of	concerning this matter, please c	all:	(1)
URSULA PINHO WILI	LIAMS	850 723-3051	
Name o	f Person		ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fec. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration		Street Address: Registration Se	ction
Division of Corporations		Division of Cor	rporations
P.O. Box 632 Tallahassee.		The Centre of 7	Fallahassee be Street, Suite 810
rananassee.	にし シキシエマ	ムサモス IN. MIOHIO	e once, our ord

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NIKKO OF PA	CE DOGWOOD LLC	
(Name of the Limited Liability Comp (A Florida Limited	oany as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on _JANUARY 11, 2022	and assigned
Florida document number L22000023418		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
KOBI HIBACHI ANI	O SUSHI LLC	
The new name must be distinguishable and contain the words "Limited Lial	oility Company," the designation "LLC" or th	e abbreviation "L.IC."
Enter new principal offices address, if applicable:		22
(Principal office address MUST BE A STREET ADDRESS)		70 3
		9
Enter new mailing address, if applicable:	 	P
(Mailing address MAY BE A POST OFFICE BOX)		- 150 - 25 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -
	# t	<u> </u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	ame of the new registere
Name of New Registered Agent:	·	
New Registered Office Address:	Enter Florida street address	
	Emer Funtau sireet aauregs	
	, Florida	Ziv Code
	3.163	LIII COGC

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>	Address	Type of Action
			□Add
		·	□Remove
			□Change
			🗆 Add
			□Remove
			2021Change
			Hadd 7
			DRemove T
		100	☐ Change
			□Add
		.	□Remove
			□Change
			□Add
			□Remove
			□Change
			DAdd
			□Remove
			□ Change

AMENDING ARTICLE FONLY, NAME O				
				
<u></u>	 		· ·	
				
				
				203
			7	10 E
				-5 =
				130 N
 				
				
fective date, if other than the date of filing: in effective date is listed, the date must be specific and co te: If the date inserted in this block does not me cument's effective date on the Department of Sta	et the applicable s	e of filing or more than statutory filing requit	(optional 90 days after filing rements, this date) 3.) Pursuant to 605. 3 will not be liste
ecord specifies a delayed effective date, but not a is filed.	n effective time, a	it 12:01 a.m. on the c	earlier of: (b) T	he 90th day afler
JANUARY 10 ted	2024			
(Imula (Villa	us .		
Signature of a me	muce or aumorized	representative of a me	moer	

Filing Fee: \$25.00