L22000044635

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	<i>⇒</i> #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

7899 IAN 21 PM 1:

D. O'KEEFE FEB - 7 2022

Song J. Lim

602 North Dale Mabry Hwy, Tampa, FL 33609

TEL: 813-871-3233

January 13, 2022

Florida Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Re: Articles of Organization of

KS Japanese Food Service, LLC

Dear Sir/Madam:

2022 JAN 21 PM 1: 32 SECRETARY OF STATE FALLAHASSEE, FLORID,

Please see below the affidavit of statement stating that I have no intention of reinstating the entity of L09000108979

AFFIDAVIT

I have no intention of reinstating the Florida Limited Liability company of KS Japanese Food Service, LLC (L09000108979) and therefore, I am releasing the name for use to another entity so that anyone can use the name.

Song J. Lim

Now, I am reapplying to use the name of KS Japanese Food Service, LLC, and please approve the new articles of organization and Registered Agent statement which are herewith submitted.

We thank you very much for your cooperation and please call me at (813) 876-6442 should you have any questions in this matter.

Very truly yours,

Song J. Lim

COVER LETTER

	ew Filing Sec ivision of Cor					
CUD LECT.		ESE FOOD SERVI	CE, LLC			
SUBJECT	:	Name	of Limited	l Liability	y Company	
The enclose	ed Articles of	Organization and fe	e(s) are sul	bmitted f	or filing.	
Please retur	m all correspo	ondence concerning	this matter	to the fo	Howing:	
	SONG J. LII	М				
		·	N	ame of P	erson	
	KS JAPANE	SE FOOD SERVIC	E, LLC			
			F	irm/Com	pany	
	602 NORTH	DALE MABRY H	IGHWAY			
			-	Addres	s	
	TAMPA, FL	33609				
,	-1112@		City/S	State and	Zip Code	
<u>-</u>	cih.choi3@gn E		e used for	future an	nual report notification	on)
For further in	iformation co	ncerning this matter	please cal	l:		
	кі н. сноі		813 _at (١	876-6442	
-	Nam	e of Person			Daytime Telephone	e Number
Enclosed is	a check for the	ne following amount	:			
	Filing Fee	-	Fee &	Certified	00 Filing Fee & I Copy copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	g Address iling Section on of Corporations ox 6327 assee, FL 32314		Т 2	treet Address few Filing Section Di he Centre of Tallaha 415 N. Monroe Stree allahassee, FL 3230	ssee et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT:	CI	F	· -	No.	me

The name of the Limited Liability Company is:

KS JAPANESE FOOD SERVICE, LLC

Principal Office Address:

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

CONDETTEDATE MADRY HIGHWAY	602 NORTH DALE MABRY HIGHWAY
602 NORTH DALE MABRY HIGHWAY	002 NOKTH DALE MADKT HIGHWAT
TAMPA, FL 33609	TAMPA, FL 33609

Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

	Name	
602 NORTH DALE	E MABRY HIGHW <u>A</u>	Y
Florida street addre	ess (P.O. Box <u>NOT</u> ac	cceptable)
ТАМРА	FL 33609	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. 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 relating 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2022 JAN 2 | PM |: 32

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
_	CONCILIN
AMBR	SONG J. LIIM 602 NORTH DALE MABRY HWY
	TAMPA, FL 33609
	TAMIT A. 1 L 33003
ANADD	OK HWA LIM
AMBR	602 NORTH DALE MABRY HWY
	TAMPA, FL 33609
	1/1/11/11/11/11/11/11/11/11/11/11/11/11
	
(Use attachment if necessary)	
	L. C. CELL TANITA DAVIG 2022 (ODTIONIAL)
ARTICLE V: Effective date, if other than t	he date of filing: JANUARY 15, 2022 (OPTIONAL)
	t be specific and cannot be more than five business days prior to or 90 days after
the date of filing.)	
Note: If the date inserted in this block do	es not meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Depa	rtment of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
Signature	of a member or an authorized representative of a member.

Filing Fees:

Typed or printed name of signee

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

constitutes a third degree felony as provided for in s.817.155, F.S.

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

SONG J LIM