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(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
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04/28/06--01055--007 **35.80

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06 APR 28 AM 9: 43

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BLUEFIN SUSHI, INC, (Name of Corporation)
DOCUMENT NUMBER: DU5-000(2886)
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
YOZO NATSU (Name of Contact Person)
(Name of Contact Person)
BLUEFIN SUSHI INC, (Firm/Company)
7719 GREAT GLEN CIRCLE
DELRAY BEACH FC , 33446 (City/State and Zip Code)
For further information concerning this matter, please call:
YOZO NATSVI (Name of Contact Person) at (S6/25/-2035) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

order officer file and projection to the properties of the

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1		
statement of change is submitted for a corporation organized und		
in order to change its registered office or registered age	ent, or both, in the State c	of Florida.
1. The name of the corporation: BLUEFIN S	USHI INC	<i>,</i>
2. The principal office address: 77/9 GREAT	GLEN CIR	.CLE
DELRAY BEACH F	C1 33446	<u> </u>
3. The mailing address (if different):		<u> </u>
	,v , 	
4. Date of incorporation/qualification: $f = 1 - 0.6$ D	ocument number:P	5300 BSEL
5. The name and street address of the current registered agent and Florida Department of State:	d registered office on file	with the of
YOZO NATSUL		91.05 91.05
70/ S.W 148 AVE,	#/03	
SUNKISE FLI333	は	
6. The name and street address of the new registered agent (if changed):		office
BLUTT YOZO NA		·
17719 GREAT GLE	N CIRCLE	
7719 GREAT GLE, (P.O. BOX NOT acceptable) DELRAY BEACH	FC133440	5
The street address of its registered office and the street address as changed will be identical.		
Such change was authorized by resolution duly adopted by its authorized by the board, or the corporation has been notified it	board of directors or by n writing of the change	y an officer so
(Signature of an officer or director)	YOZO (Printed or typed name	,
I hereby accept the appointment as registered agent and agre I further agree to comply with the provisions of all statutes re of my duties, and I am familiar with and accept the obligation document is being filed merely to reflect a change in the regis corporation has been notified in writing of this change.	e to act in this capacity, lative to the proper and of my position as regis tered office address, I h	complete performance tered agent. Or, if this ereby confirm that the
(Signature of Registered Agent)	4-26-6 (Date)	06
If signing on behalf of an entity:		
(Typed or Printed Name)		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *