

PO9000092602

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

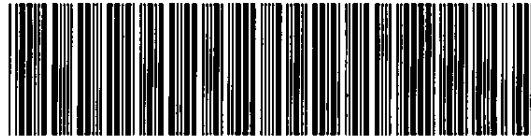
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

*Riser  
12/3/09*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

SUBJECT: MIKATA BUFFET INC  
Name of Corporation

DOCUMENT NUMBER: P09000092602

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:

Name of Contact Person

C.K.SEA & CO.,LLC  
Firm/Company

15 DIVISION ST STE 708  
Address

NEW YORK, NY 10002  
City/State and Zip Code

ckseacpa@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Contact Person

at ( 212 ) 966-7199  
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**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, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MIKATA BUFFET INC.
2. The principal office address: 3201 NORTHWEST FEDERAL HIGHWAY  
GENSEN BEACH, FL 34957
3. The mailing address (if different): 15 DIVISION ST STE 708  
NEW YORK, NY 10002
4. Date of incorporation/qualification: 11/10/2009 Document number: P09000092602

5. The name and street address of the current registered agent and registered office on file with Florida Department of State: (If resigned, enter resigned)

DA QUI, NI (RESIGNED)

3201 NORTHWEST FEDERAL HIGHWAY

GENSEN BEACH, FL 34957

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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LIN, XIA LING

3201 NORTHWEST FEDERAL HIGHWAY

P.O. Box NOT acceptable

GENSEN BEACH, FL 34957

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Xia Ling Lin  
Signature of an officer or director

XIA LING LIN  
Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Xia Ling Lin  
Signature of Registered Agent

11/25/09  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

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