P12000089576

(Re	questor's Name)	······································
(110	quodioi o marrio)	
(Ad	dress)	
,		
(Ad	dress)	 :
(Cit	y/State/Zip/Phone	- #N
(Cit	.y/Otate/Zip/i florii	σ π)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(De	cument Number)	
(50	· ·	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
opeoidi mendedone to	i ming Cinicor.	:
i I		

Office Use Only



000240655000

11/01/12--01015--005 **35.00

DEPARTMENT OF STATE

Mard, 12 MOV - 1 AH II: 000

Delication of the second of t



1000 Ponce de Leon Blvd. Suite: 105 Coral Gables, FL 33134 Phone: 305-444-4994 Email: filing@ecfsfiling.com

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

(CORPORATE NAM	_	(DOCUMENT#)		
2. (CORPORATE NAM	TE)	(DOCUMENT #)		
3. (CORPORATE NAM	Ε)	(DOCUMENT #)		
□ Walk-In	Pick up time: ☐ Cei	Titled Court Title of Court		
		rtified Copy 🗀 Certificate Of Status		
New Filings Profit	Amendments Amendments	Other Filings Annual Report		
New Filings	'Amendments'	GOther Filings		
New Filings Profit	Amendments Amendments	Annual Report Fictitious Name		
New Fillings Profit Non-Profit	Amendments: Amendments Resignation	Annual Report Fictitious Name		

Examiners Initials

Articles of Amendment Articles of Incorporation of

RAW SUSHI LOUNGE, INC.

	<u>led with the Florida Dept. of</u>	State)
	P12000089576	••
(Document Number of	Corporation (if known)	
rsuant to the provisions of section 607.1006, Florida Articles of Incorporation:	Statutes, this <i>Florida Profit</i> (Corporation adopts the following
If amending name, enter the new name of the co	rporation:	
ne must be distinguishable and contain the word orp.," "Inc.," or Co.," or the designation "Corp, d "chartered," "professional association," or the c	" "Inc," or "Co". A profes.	" or "incorporated" or the sional corporation name mus.
Enter new principal office address, if applicable incipal office address <u>MUST BE A STREET ADD</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>	
. If amending the registered agent and/or register new registered agent and/or the new registered of		enter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	(City)	, Florida(Zip Code)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief . Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	PSI)	RENE RAMIREZ	1000 PONCE DE LEON BLVD
XX Add		<u> </u>		STE 105
Remove				CORAL GABLES, FL 33134
2) Change				
Add		_		
Remove				
3) Change				
Add				
Remove				4/4
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change	<u> </u>			
Add				
Remove				

	h <i>additional sheets</i>	, if necessary).	(Be specific)	ge(s) here:		

	<u> </u>					
						<u> </u>
				······································		
			•			
	amendment provi	des for an exch	ange, reclassific	ation, or cancel	lation of issued sh	ares,
lf an :	· · · · · · · · · · · · · · · · · · ·			ontained in the a	mendment itself:	
prov	risions for implem	enting the amei indicate N/A)	nument it not co			
prov	risions for implem (if not applicable, i	indicate N/A)	nament ii not co			
prov	risions for implem	indicate N/A)	nament ii not co			
prov	risions for implem	indicate N/A)	nament ii not co			
prov	risions for implem	enting the amei	nament ii not co			
prov	risions for implem	indicate N/A)	nament ii not co			
prov	risions for implem	enting the amer	nament ii not co			
prov	risions for implem	indicate N/A)	nament ii not co			
prov	risions for implem	enting the amei	idment if not co			
prov	risions for implem	enting the amei	idment if not co			

The date of each amendment(s) a	doption: 10-30-2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated	
Signature	Kut
selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	RENE RAMIREZ
	(Typed or printed name of person signing)
	PSD
	(Title of person signing)