P17000010521

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COVER LETTER

Division of Con	··· • ··				
NAME OF CORPO	RATION: Sushi Nami Inc		•		
	BER: P17000010521				
The enclosed Articles	of Amendment and fee are s	submitted for filing.			
Please return all corre	espondence concerning this m	latter to the following:			
	Terri Metter				
		Name of Contact Perso	on		
	Zuelch Accounting				
		Firm/ Company			
	2951 Overseas Highway	. ,			
		Address	,		
	Marathon FL 33050				
		City/ State and Zip Cod	le		
ternid	Dzuelchaccounting.com				
	*	sed for future annual report	notification)		
			. monthemony		
For further information	n concerning this matter, plea	se call:			
Terri Metter					
		at (743-4703 de & Daytime Telephone Number		
Name (of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Plorida Depa	urtment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section			Address		
	ion of Corporations	Amendment Section			
P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 E	2661 Executive Center Circle		
		Tallaha	ssee, FL 32301		



To:3054519650

	Articles of	Amendment	
		to Incorporation	
		of	
	DILSHI N	Λ. (.)	
(Nam-	e of Corporation as curren	nthy filed with the Florida Dept. of State)	
P17000010521	0.15		
		1000010521	
		of Corporation (if known)	
Pursuant to the provisions of section 60 its Articles of Incorporation:	7.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amends	
A. If amending name, enter the new	name of the corporation:		
name must be distinguishable and co "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associ		ion," "company," or "incorporated" or the abbreviate "Co". A professional corporation name must contain to	
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		99490 Overseas Highway	
		Key Largo FL 33037	
S F			
Enter new malling address, if app (Mailing address MAY BE A POST	licable: OFFICE BOX)	PO Box 548	
		Key Largo FL 33037	
. If amending the registered agent as	id/or registered office add	ress in Florida, enter the name of the	
new registered agent and/or the ne	v registered office address	ices in Fibrida, enter the name of the	
Name of New Registered Agent	Zuelch & Zuelch LLC		
	2951 Overseas Highway		
	(Florida str	reel address)	
New Registered Office Address:	Marathon	33050	
		(City) Florida (Zip Code)	
		(Lip code)	
ew Registered Agent's Signature, if cl	Anging Registered Agent		
egisti deceptione appointment as registi	rea agent. I am familiar v	t. With and accept the obligations of the position.	
/	h.,	7 11	
	West Mr.	lotter	
	Signature of New R	egistered Agent, if changing	
		and and and and	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and uddress 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.

<u>X</u> Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$Y</u>	Salty Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
l) Change	Р	Physaysavath Lomveha	16860 Carmen Ave
Add			Miami FL 33173
X Remove			
2) Change	VP	Souvanna Phouthavong	4327 NW 1st Street
Add			Deerfield Beach FL 33442
X Remove		,	
3) Change	P	Thanaporn T Chantharatri	90 Avenue C
X Add			Key Largo FL 33037
Remove			
4) Change		-	
Add			
Remove			
5)Change			<u> </u>
Add			
Remove			
(i) Change			
Add		•	
Remove			

	nal Articles, enter change ssary). (Be specific)		
· · · · · · · · · · · · · · · · · · ·			
an amendment provides for an rovisions for implementing the (If not applicable, Indicate N.	n exchange, reclassification e amendment if not contains/A)	n, or cancellation of is ined in the amendment	ued shares, itself:

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	08/01/2017	
The date of each amendmen date this document was signed	t(s) adoption:	if other than the
Effective date if applicable:	08/01/2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date with the Department of State's records.	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wen by the shareholders was/we	re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.	
The amendment(s) was/wer must be separately provide	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vate separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling group)	
action was not required.	e adopted by the board of directors without shareholder action and shareholder e adopted by the incorporators without shareholder action and shareholder	
•		
Dated		
Signature	_	
(B)	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Thanaporn T Chantharatri	
	(Types of printed name of person signing)	
	President Promoponal	
	(Title of person signing)	