P9600000 4643

(F	Requestor's Name)					
(Address)						
(/	Address)	-				
(0	City/State/Zip/Phone #)	.				
PICK-UP	☐ WAIT	MAIL				
(I	Business Entity Name)					
(Document Number)						
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COVER LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: Sushi Republic, Inc. Name of Corporation						
DOCUMENT NUMBER: P96000004643						
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:						
Takahiro Kohara Name of Contact Person						
Sushi Republic Firm/Company						
9583 Harding Ave						
Surfside, FL 33154 City/State and Zip Code						
te ktite op muc. biglobe.ne. je E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Takahiro Kohara at (786) 837-3469 Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a \$35.00 check made payable to the Department of State.						
Mailing Address: Amendment Section Street Address: Amendment Section						
Division of Corporations Division of Corporations Division of Corporations						
P.O. Box 6327 Clifton Building						

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

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

statement of ch	provisions of sections 607.0502, ange is submitted for a corporati	on organized	under the laws of the	State of Florid	da	
	er to change its registered office			State of Florido	t.	
1. The name of	the corporation:	JBLIC, INC	·			
2. The principal	office address: 9583 Harding	Ave, Surfs	side, FL 33154			
3. The mailing	address (if different):					
4. Date of incor	poration/qualification: 1/8/199	6	_ Document number:	65-0633822		
	d street address of the current reg rtment of State: (If resigned, ento		and registered office	on file with the		
	-Resigned- Baker, Stever	Matthew				
	Baker, Reck & Associates	s P.A				
	2500 E. Hallandale Beach	h Blvd. Suit	e405, Hallandale	Beach		
6. The name and (if changed):	d street address of the new registered Agents Inc.	ered agent (if	changed) and /or reg	istered office	2019773	
				 	- W - T	
	7901 4th St N STE 300 P.O. Box NOT acceptable					
	St. Petersburg FL 33702	o. Box NOT accep	CHOIC	· -	11. 1=1.)	
The street addr	ess of its registered office and the identical.	ne street addr	ess of the business of	ffice of its regis	tered agent.	
Such change w authorized by t	as authorized by resolution duly he board, or the corporation has	adopted by i	ts board of directors I in writing of the ch	or by an officer ange.	· so	
	Logo.	Та	kahiro Kohara			
Signature of an officer or director Printed or typed name and title						
I further agree performance of agent. Or. if th	the appointment as registered a to comply with the provisions of my duties, and I am familiar wi iis document is being filed meret that the corporation has been n	f all statutes i ith and accep ly to reflect a	relative to the proper t the obligation of m change in the regist	r and complete	gistered ess, I	
Piec Han	-	3/	8/2019			
Sig	nature of Registered Agent		Date	:		
If signing on bo	ehalf of an entity:					
Bill Havre						
	and or Printed Nume					

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