

05/29/2014 14:28

305670-1993

GUZMAN & GUZMAN, P.A.

PA 01/05

Division of Corporations

<http://efile.sos.fl.gov/scripts/efilecovr>

L090000 37132

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000126148 3)))



H140001261483ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : GUZMAN & GUZMAN, P.A.
Account Number : I20080000090
Phone : (305) 670-1991
Fax Number : (305) 670-1993

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GOLDEN FEDERAL LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 MAY 29 AM 8:18

FILED

RECEIVED
14 MAY 29 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 30 2013

T. HAMPTON

05/29/2014 14:28 3056701993

GUZMAN & GUZMAN PA,

PAGE 02/05

Division of Corporations

<https://efile.sunbiz.org/scripts/efilcovr>

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

H 140001261483

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

GOLDEN FEDERAL LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/17/2009 and assigned
Florida document number L09000037132.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
2014 MAY 29 AM 8:18
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

H 140001261483

H14 0001261483

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated MAY, 29, 2014


Signature of a member or authorized representative of a member

G & G MANAGEMENT US LLC

Typed or printed name of signer

FILED

2014 MAY 29 AM 8:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H14 0001261483