

**L18000231928**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

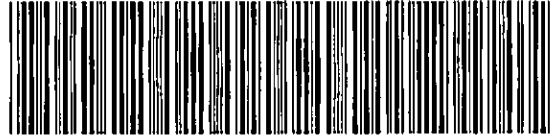
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200323957642

01/30/19--01005--019 \*\*55.00

19 JAN 30 PM 12:47

2019 JAN 30 A 6:41

FILED

1/31/19 DS

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

GOLDEN GAI, LLC

Signature \_\_\_\_\_

Requested by: Seth

Name \_\_\_\_\_

Walk-In \_\_\_\_\_

01/30/19

Date \_\_\_\_\_

Time \_\_\_\_\_

Will Pick Up \_\_\_\_\_

- FILED  
2019 JAN 31 AM 11:02  
TALLAHASSEE, FLA.
- \_\_\_\_\_ Art of Inc. File \_\_\_\_\_
  - \_\_\_\_\_ LTD Partnership File \_\_\_\_\_
  - \_\_\_\_\_ Foreign Corp. File \_\_\_\_\_
  - ☒ L.C. File \_\_\_\_\_
  - \_\_\_\_\_ Fictitious Name File \_\_\_\_\_
  - \_\_\_\_\_ Trade/Service Mark \_\_\_\_\_
  - \_\_\_\_\_ Merger File \_\_\_\_\_
  - ☒ Art. of Amend. File \_\_\_\_\_
  - \_\_\_\_\_ RA Resignation \_\_\_\_\_
  - \_\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_
  - \_\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_
  - ☒ Cert. Copy \_\_\_\_\_
  - \_\_\_\_\_ Photo Copy \_\_\_\_\_
  - \_\_\_\_\_ Certificate of Good Standing \_\_\_\_\_
  - \_\_\_\_\_ Certificate of Status \_\_\_\_\_
  - \_\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_
  - \_\_\_\_\_ Corp Record Search \_\_\_\_\_
  - \_\_\_\_\_ Officer Search \_\_\_\_\_
  - \_\_\_\_\_ Fictitious Search \_\_\_\_\_
  - \_\_\_\_\_ Fictitious Owner Search \_\_\_\_\_
  - \_\_\_\_\_ Vehicle Search \_\_\_\_\_
  - \_\_\_\_\_ Driving Record \_\_\_\_\_
  - \_\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_
  - \_\_\_\_\_ UCC 11 Search \_\_\_\_\_
  - \_\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_
  - \_\_\_\_\_ Courier \_\_\_\_\_

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: GOLDEN GAI, LLC**

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deborah Love

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

Friedman, Rosenwasser & Goldbaum, P.A.

\_\_\_\_\_  
Firm/Company

7280 W. Palmetto Park Rd., Suite 202

\_\_\_\_\_  
Address

Boca Raton, FL 33433

\_\_\_\_\_  
City/State and Zip Code

dlove@frglaw.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah Love

561

404-8755

at ( )

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

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☒ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

2019 JUN 30 A 6:41  
FILED

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

GOLDEN GAI, 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 10/01/2018 and assigned  
Florida document number L18000231928.

This amendment is submitted to amend the following:

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

JAPANESE MAXIMUM, LLC

The new name must be distinguishable and contain 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)

**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*

*City*

Florida

*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

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

☐ Change

☐ Add

☐ Remove

☐ Change

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

2008 JAN 30  
A 15:21  
154 17.00

77

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated January 28, 2019

Ronald N. Rosenwasser

Signature of a member or authorized representative of a member

Ronald N. Rosenwasser

Typed or printed name of signee