

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000374095

**Entity Name:** GOYOMATSU USA LLC

**Current Principal Place of Business:**

189 DANUBE DR  
ZEBULON, NC 27597

**Current Mailing Address:**

189 DANUBE DR  
ZEBULON, NC 27597 US

**FEI Number:** 88-3938859

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LEMOINE MANZANERO, KAREN K  
222 NE 25 STREET APT 1209  
MIAMI, FL 33137 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            LEMOINE MANZANERO, KAREN K  
Address        222 NE 25 STREET APT 1209  
City-State-Zip: MIAMI FL 33137

Title            DIRECTOR  
Name            ARZOLA, TITO ALEJANDRO  
Address        189 DANUBE DR  
City-State-Zip: ZEBULON NC 27597

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TITO ARZOLA

**DIRECTOR**

**04/23/2025**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date