

**L07000114904**

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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**Kaizen Wealth Management, LLC**

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FAX AUDIT # 4070002789453

**ARTICLES OF ORGANIZATION  
OF  
Kaizen Wealth Management, LLC**

**ARTICLE I NAME**

The name of the limited liability company shall be: **Kaizen Wealth Management, LLC**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: 139 NE First Street, Miami, Florida 33132.

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: Derrick DeMay, 139 NE First Street Penthouse 14, Miami, Florida 33132. Located in the County of Miami-Dade.

**ARTICLE IV DURATION**

The duration for the limited liability company shall be: 12/31/2047.

**ARTICLE V MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Derrick DeMay, 139 NE First Street, Miami, Florida 33132

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Date: November 7, 2007

Business Filings Incorporated, Organizer  
Mark Williams, A.V.P.  
Authorized Representative  
Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison, WI 53717  
(608) 827-5300

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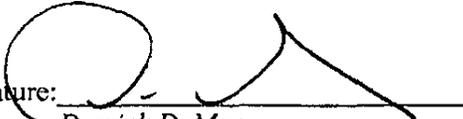
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Kaizen Wealth Management, LLC**

The name and address of the registered agent and office is Derrick DeMay, 139 NE First Street Penthouse 14, Miami, Florida 33132. Located in the County of Miami-Dade.

Having been named as registered agent and to accept service of process for the above stated company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature:   
*Derrick DeMay*

Date: *Nov. 9<sup>th</sup>, 2007*

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