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(Re	equestor's Name)			
(Ad	dress)			
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TO:	Registration Se Division of Cor			
ट्राफ स्ट		A FILMS LLC		
SUDJE	CT:	Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		FRANCISCO AMAT		
			Name of Person	
		ZATOPEKA FILMS LLC		
			Firm/Company	
1809 SW 23RD TER				
		Firm/Company 1809 SW 23RD TER Address MIAMI/ FLORIDA 33145		
		MIAMI/ FLORIDA 33145	i	
		francis@zatopekafilms.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notifi	cation)
For furt	her information co	oncerning this matter, please ca	all:	
FRAN	CISCO AMAT		786 8539462 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne 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

ARTICLES OF ORGANIZATION OF

ZATOPEKA FILMS LLC				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records. Liability Company))		
The Articles of Organization for this Limited Liability Company Florida document number	were filed on OCTOBER, 14, 20	014 and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC"	or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	1809 SW 23RD TERRACE			
Principal office address MUST BE A STREET ADDRESS)	MIAMI	产 紹 👱		
	FLORIDA 33145			
Enter new mailing address, if applicable:	1809 SW 23RD TERRACE	YI7 /		
Mailing address MAY BE A POST OFFICE BOX)	MIAMI			
	FLORIDA 33145	9E 35		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		enter the name of the		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	, Flor	ida Zip Code		
New Registered Agent's Signature, if changing Registered Agent:	<i>∨••₁</i>	sup Coue		

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

. ,

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	PALOMA GONGORA	1809 SW 23RD TER	□ Add
		MIAMI	
		FLORIDA 33145	□ Remove
			■ Change
MGR	FRANCISCO AMAT	1809 SW 23RD TER	Add
		MIAMI	☐ Remove
		FLORIDA 33145	Change Change
AP	PABLO AMAT	1809 SW 23RD TER	_
		MIAMI	Add
		FLORIDA 33145	Remove
		, , , , , , , , , , , , , , , , , , ,	☐ Change
AP	ALVARO AMAT	1809SW 23RD TER	Add
		MIAMI	☐ Remove
		33145	Change
AP	JACOBO AMAT	1809 SW 23RD TER	-
		MIAMI	Add
		TI ODIDA 20145	□ Remove
		FLORIDA 33145	☐ Change
			□ Remove
			☐ Change

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		04/18/	2016			
E. Effect	tive date, if other than the date of fective date is listed, the date must be spec-	f filing:	prior to date of filin	opti	ional) r filing \ Pursuant t	o 605 0207 (3)(I
Note:	If the date inserted in this block doe	s not meet the a	pplicable statutory	filing requirements, thi	is date will not be	e listed as the
docun	nent's effective date on the Departme	ent of State's rec	ords.			
Tf tha us	and annificate delacted off					
(b) The	cord specifies a delayed effec e 90th day after the record is	tive date, bu filed.	t not an errect	ive time, at 12:01	a.m. on the e	earlier of:
Dated	APRIL 18TH	2016	<u> </u>	_		
		—, <u>—</u>)		`
	Signatur	re of a member to	authorized represen	tative of a member	· · ·	<u></u>
	FRANCISCO AMAT					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00