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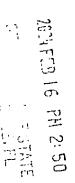
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02/28/24



COVER LETTER

TO: Registration Se Division of Cor					
Kaizen 7 Fi	•				
SUBJECT:	Name of Lim	ited Liability Company			
	Amendment and fec(s) are sub	G			
	Dylan Dante A Redondo	3			
	Kaizen 7 Films LLC	Name of Person			
	6220 S. Orange Blossom T	Firm/Company rail Ste #511			
	Orlando FL., 32809	Address			
	rdylan33@gmail.com	City/State and Zip Code			
For further information of	rman address: (concerning this matter, please ca	to be used for future annual report notifi	leation)	. ~	
Dylan Redondo	orcerning this matter, picase ca	an. 407 8107176 at ()		2024 FEB 16	2 - 25 mg
Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a check for the	he following amount:				J
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified Co	of Status &	
<u>Mailing Addres</u> Registration :		Street Address: Registration Sec	tion		

Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kaizen 7 Films LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) ad Liability Company)	
The Articles of Organization for this Limited Liability Comparation for this Liability Comparat	ny were filed on 1/24/24	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation "LLC" or the al	obreviation "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)	10622 Bresslyn Blvd Orlando FL, 32825	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ce address on our records, <u>enter the nam</u>	2024 FE
Name of New Registered Agent:		57
New Registered Office Address:	Enter Florida street address	2: 5
	, Florida	Zin Cale

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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Dylan Dante A Redondo	10622 Bresslyn Blvd	
		Orlando FL, 32825	
			□Remove
			□ Ct
			□ Change
			□Add
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			CACHOVE
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fective date, if other than the c	ate of filing:	(optional)
n effective date is listed, the date must	be specific and cannot be prior to date of filing of n k does not meet the applicable statutory filir	nore than 90 days after filing) Pursuant to 605 0207 (ag requirements, this date will not be listed as t
ecord specifies a delayed effective is filed.	date, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90th day after the
February 2nd	2024	
ted	·	
	gnature of a member of authorized representative	/
		4 45 F 45 454 4545 PA 455