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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Khalil Ventures of Tuskawilla LLC		<u> </u>			
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears of ability Company)	n our records.			
The Articles of Organization for this Limited Liability Company	were filed on	5/12/2011	ar	nd assign	ned
Florida document number L11000056307					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabil	ity company here	: FFG Tuskawi	la, LLC		
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the desi	gnation "L.L.C" or th	e abbreviatí	on "L.L.C	· · ·
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)					
					
Enter new mailing address, if applicable:			<u> </u>	20 2 1	
(Mailing address MAY BE A POST OFFICE BOX)	· • · • · • · • · • · • · • · • · • · •		, m , m	<u>></u>	# <u>#</u>
			<u> </u>	70 - 72 - 73	CERTS CERTS
B. If amending the registered agent and/or registered office ac	idress on our rec	ords, enter the n	ame of th	enewr	egis ter ed
agent and/or the new registered office address here:		, <u></u>		٦.	7-17
			-': 1		
Name of New Registered Agent:	<u>.</u>		<u> </u>		
New Registered Office Address:			<u> </u>		
	Enter i loridi	i street address			
	City	Florida] Zin	Code	
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as pubeing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of m rovided for in Ch	y duties, and 1 d apter 605, F.S. (m familia Pr. if this	ir with docume	and
If Chang	ging Registered Agen	t, Signature of New	Registered	l Agent	
			11		

Page 1 of 3

If amending or removed	g Authorized Person(s) authorized to n from our records:	nanage, <u>enter the title, name, ar</u>	nd address of each person being added		
MGR = M AMBR = A	lanager uthorized Member				
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action		
			□Add		
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D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if nece	zsary.)
			
		 	
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F Effective	date, if other than the date of filing:(option	nal)	
(If an effective Note: If the	re date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after the date inserted in this block does not meet the applicable statutory filing requirements, this is effective date on the Department of State's records.	filiog.)	Pursuant to 605,0207 (2 will not be listed as th
	specifies a delayed effective date, but not an effective time, at 12:01 ath day after the record is filed.).m. o	n the earlier of:
Dated Ap	ii 19 2024		
	Signature of a member or authorized representative of a member	<u> </u>	
	agradite of a member of audofized representative of a member		
	Mohamed Khalil		
	Typed or printed name of signee		

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