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Registration Section

TO:

Divisio	on of Cor	porations		
M SUBJECT:	IOSSA PR	ROPERTIES LLC		
		Name of Lin	ited Liability Company	
The enclosed A	rticles of	Amendment and fee(s) are sub	mitted for filing.	
Please return al	l correspo	ndence concerning this matter	to the following:	
		T. Matthew Ladyman		
			Name of Person	
		Nishad Khan, P.L.		
		1303 N. Orange Ave.		
	Nishad Khan, P.L. Firm/Company			
		Orlando, F1, 32804		
		matthew@nishadkhanlaw.e	·	
		-		cation) SE 20
For further info	rmation co	oncerning this matter, please of	all:	22 OC CRE
T. Matthew Lac	dyman		407 228-9711 at ()	2022 OCT 28 SECRETARY TALLAHA
	Name of	l'Person	Area Code Daytime	Telephone Number SSEL F
Enclosed is a ch	neck for th	e following amount:		
■ \$25.00 Filii	ng Fee	S30,00 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)
	g Address		Street Address: Registration Sec	tion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MOSSA	DD	OPL	rrg:	EQ.	1.1	C
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(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/22/2022 and assigned Florida document number _____1.20000169014 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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) B. If amending the registered agent and/or registered office address on our records, enter the name of the www registered agent and/or the new registered office address here: 9 Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

_, Florida _

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IT afficiently 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	Nishad Khan PL	1303 N. Orange Ave.	□Add
		Orlando, Florida 32804	■Remove
			□ Change
MGR	ELLA MOSSA	13570 Grove Drive #296	■Add
		Maple Grove, MN 55311	□Remove
			□Change
			□Add
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te: If the date is listed, the	r this block does not m	neet the applicable.	ic of filing or more tha statutory filing requ	in 90 days after till iirements, this da	ig.) Pursua te will no	nt to 605,020 t be listed as
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cord specifies a delayed	effective date, but not	an effective time.	nt 12:01 a.m. on the	earlier of: (h)	The 90th c	lay after the
s filed.	·				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	my arrest the
		2022				
ed July 14 — Docusigned Ella Ma	by. ,	<u> </u>				

Filing Fee: \$25.00