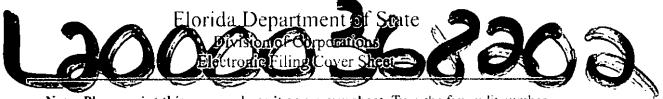
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Division of Corporations



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)573-3996 Fax Number : (954)208-0845

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WASA FUND IV LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wasa Fund IV LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	is as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on 12/03/2020	and assigned
Florida document number L20000368202		
his amendment is submitted to amend the following:		
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 "L.L.C" 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:		
he new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the designation "LLC" o	the abbreviation "L.L.C"
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		22
<ol> <li>If amending the registered agent and/or registered office ac</li> </ol>	ddress on our records, <u>enter th</u>	
gent and/or the new registered office address here:		
		<u>~</u> — —
Name of New Registered Agent:		<del></del>
New Registered Office Address:		
ATTENDED TO THE PARTY OF THE PA	Enter Florida street address	22
	, Flori	da
	Спу	Zıp Code

## 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 Changing Registered Agent, Signature of New Registered Agent

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

From; Lexus Wingo

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BISTRIZKY, MORDECHAI	4625 POST AVE MIAMI BEACH, FL 33140	□Add
			Remove
			[] Change
MGR	Bistritzky, Joseph	4625 POST AVE MIAMI BEACH, FL 33140	
			□Remove
			□Change
			[]Add
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Effective date, if other than the first effective date is listed, the date in Note; It the date inserted on this document's effective date on the	aust be specific a block does not	nd cannot be p meet the app	nor to date of fil olicable statute	ling or more than ory filling requir	(optiona 90 days after ülir ements, this da	ng ) Pursuant to 605.	5,020 ed as
e record specifies a delayed effect rd is filed.	tive date, but n	ot an effectiv	e time, at 12:6	)La,m, on the e	arlier of: (b)	The 90th day after	r (he
Dated January 28		2022	·				
	$\sim$						
	Jose	ph Bist	ictory				
	Signature of	ph Bist	etzky wherited repre	sentative of a me	mber	<del></del>	