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Division of Corporations

Fax Number : (850)617-6383

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COVER LETTER

Division of Co			
MOSU PO	MEL LLC		· ·
SOBJECT,	Name of Lin	nited Liability Company	
The enclosed Articles of	Division of Corporations MOSU FOMEL LLG Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filling. Recreturn all correspondence concerning this matter to the following: Name of Person Firm:Company Address City/State and Zip Code E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: Name of Person Area Code Daytime Telephone Number posed is a check for the following amount: S25.00 Filling Fee Certificate of Status Certificate of Status & Certificat Copy Certificat Copy Certificat Copy Certified Copy Certified Copy Certified Copy Certified Copy		
Please return all correspo	ondence concerning this matter	to the following:	
		Name of Person	
		Firm/Company	
		Address	
		City/State and Zip Code	
	Name of Limited Liability Company melosed Articles of Amendment and fee(s) are submitted for filing. e return all correspondence concerning this matter to the following: Name of Person	fication)	
For further information c	concerning this matter, please o	alt:	
	A.B.	at ()	
Name o	il Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status &

MailingAddress:

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

StreetAddress:

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

MOSU TOMELILLO			
(Name of the Limited Liability Compa) (A Florida Limited I.	ny as it now appears on o liability Company)	ur records.)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{123000218215}{12000218215}$.	were filed on $\frac{05-03-20}{}$	123	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liability and Contain the words".	ity Company," the designat	tion "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
	<u></u>		
Enter new mailing address, if applicable:		·	202
(Mailing address MAY BE A POST OFFICE BOX)			
) · · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered office a	ddress on our record	s, enter the name o	t the new registered
agent and/or the new registered office address here:		and the thanks	
			بب
Name of New Registered Agent:			N)
New Registered Office Address:			_
	Enter Floridastro	vet address	,
		Florida	
	City		Zip 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 p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my d rovided for in Chapte	uties, and Lam fam er 605, F.S. Or, if t	iliar with and his document is

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Jorge Morera Camacho	1525 N PARK DRIVE SUITE 104	= Add
	11111	WESTON, FL 33326	Remove
			□Change
			□ Add
			□Remove
			□ Change
			
			🗆 Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			🗀 Add
			Remove
			□ Chance

D. If amending any other inform				
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Effective date, if other than the tiff an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific and cannot be prid block does not meet the appl	icable statutory filing requ		
the record specifies a delayed effect and is filed	ive date, but not an effective	time, at 12.01 a.m. on the	earlier of: (h) The 90th day a	ifter the
Dated August 1	. 2023	<u> </u>		
0	rge Morera			
	ngs Morsra Signature of a member of au	thorized representative of a n	nember	
Jorge Morera				
	Typed or pir	nted name of signee		•