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COVER LETTER

TO:

	gistration Se vision of Cor				
CHD IFCT	MASS Real Estate Investments. LLC				
SUBJECT:Name of Limited Liability Company					
The enclose	ed Articles of	Amendment and fec(s) are sub	mitted for filing.		
Please retur	n all correspo	ndence concerning this matter	to the following:		
		Mario Sousa			
			Name of Person		
		•	Firm/Company		
644 Servia Drive					
			Address		
	Saint Johns, FL 32259				
		· · · · ·	City/State and Zip Code		
		mesk957@gmail.com			
For further	information c	E-mail address: (oncerning this matter, please e	to be used for future annual report not	lification)	
		oncerning and matter, preade of			
Mario Sous	sa.		732 522-8823 at ()		
-	Name o	f Person	Area Code Daytir	ne Telephone Number	
Enclosed is	a check for th	ne following amount:			
\$25,00	Filing Fee	□ \$30.00 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)	
Mailing Address:		Street Address:	action		
Registration Section Division of Corporations			Registration Section Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MASS Real State Investments, LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our record a Limited Liability Company)	<u>s.</u>)
he Articles of Organization for this Limited Liability (Company were filed on 12/19/2023	and assigned
lorida document number 400420250034	<u>_</u> .	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lim	nited liability company here:	
IASS Real Estate Investments, LLC		
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Principal office address MUST BE A STREET ADD	RESS)	
	1-12-7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
		•
nter new mailing address, if applicable:		·
Mailing address MAY BE A POST OFFICE BOX)	****	1.1
. If amending the registered agent and/or registere gent and/or the new registered office address here:	ed office address on our records, <u>enter</u>	the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres.	S
		orida
	City	Zip 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:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			□ Add
			Remove
			Change
			□Remove
			☐ Change
····			
			□Remove
			□Change
			
			□ Remove
			□Change
			□ Add
			□Remove
			Chaman.

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: _______ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated January 12 2024 Signature of a member or authorized representative of a member Mario Sousa Typed or printed name of signee

Filing Fee: \$25.00