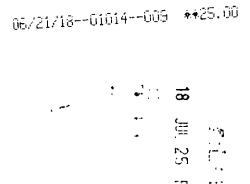
## 118000138206

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## **COVER LETTER**

	gistration Sect vision of Corpo			
SUBJECT:	PROPERTIE	S FIT LLC		
Sobject.	<del></del>	Name of Limi	ited Liability Company	<del></del>
The enclosed	d Articles of A	mendment and fee(s) are subi	mitted for filing.	
Please return	ı all correspond	dence concerning this matter	to the following:	
		Juan Carlos Sainz		
		-	Name of Person	
		PROPERTIES FIT LLC		
			Firm/Company	
		2423 SW 147 AVE #179		
			Address	
		Miami, FL 33185		
			City/State and Zip Code	
		info@sainzhomes.com E-mail address: (t	to be used for future annual report r	notification)
For further in	nformation cor	ncerning this matter, please ca	•	
Erika Cantil	lo		786 999-3326	
	Name of F	Person	Area Code Day	time Telephone Number
Enclosed is a	a check for the	following amount:		
\$25.00 F	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:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301



June 21, 2018

JUAN CARLOS SAINZ 2423 SW 147 AVE #179 MIAMI, FL 33185 US

SUBJECT: PROPERTIES FIT LLC Ref. Number: L18000138206

We have received your document for PROPERTIES FIT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 618A00012968

Judy A Leggett Regulatory Specialist II Registration Section

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROPERTIES FIT LLC			
(Name of the Lim	ited Liability Compan (A Florida Limited Li	v as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited I	Liability Company v	vere filed on <u>06-04-2018</u>	and assigned.
Florida document number L18000138206	·		25
This amendment is submitted to amend the fol	lowing:		<u> </u>
A. If amending name, enter the new name of	of the limited liabil	ity company here:	* · · · · · · · · · · · · · · · · · · ·
The new name must be distinguishable and contain the	words "Limited Liabilit	y Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
		· · · · · · · · · · · · · · · · · · ·	
. Enter new mailing address, if applicable:			
•	EBOX)		
			nter the name of the n
Name of New Registered Agent:	Sainz Homes		
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 registered agent and/or the new registered office address here:    Name of New Registered Agent:   Sainz Homes     New Registered Office Address:   2423 SW 147 AVE #179     Enter Floridation   Enter Floridat			
		Enter Florida street address	
	MIAMI	, Florid	ia 33185
		1 In	/ID L (V)P

## 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 almending 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>	<u>Address</u>	Type of Action
MGRM	JUAN CARLOS SAINZ	14461 SW 22 TERRACE MIAMI, FL 33175	
			■ Remove
			Change
MGRM	SAINZ HOMES	2423 SW 147 AVE #179 Miami, FL 33185	<b>■</b> Add
			□ Remove
			Change
•			
			Remove
			Change
	**		
			☐ Remove
		<u></u>	
_ <del></del>			
		Remove	
		<del>.</del>	Change
<del></del>			Add
			☐ Remove
			Change

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Filing Fee: \$25.00