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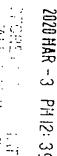
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COVER LETTER

TO:		ation Sect v of Corpo			
stro ir	AN	1ERICAN	PROPERTIES INVESTME	NTS LLC	
ac bara			Name of Lim	ited Liability Company	
The enc	losed Art	icles of A	mendment and fee(s) are sub	mitted for filing.	
Please re	etum all (correspon	lence concerning this matter	to the following:	
			HUGO J. WEIGANDT		
				Name of Person	
			AMERICAN PROPERTIE		
					
			600 CLEVELAND STREE	ET, SUITE 223	
			CLEARWATER, FL 3375	5	
			clwreillc@gmail.com	City-State and Zip Code	
			E-mail address: (t	to be used for future annual report in	otification)
For furth	ner inforr	nation cor	cerning this matter, please ca	all:	
HUGO	J WEIG	ANDT		727 656-6958	
		Name of I	Person	Area Code Dayi	time Telephone Number
Enclosed	d is a che	ck for the	fellowing amount:		
≡ \$25.	.00 Filing	: Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy vadditional 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 Cemer Circle Tallahassee, Ft. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMERICAN PROPERTIES INVESTMENT		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our reco a Limited Eubility Company)	rds.)
The Articles of Organization for this Limited Liability C		and assigned
Florida document number L20000014727	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
PROPERTIES AND HOUSING LLC		
The new name most be distinguishable and contain the words "Lin	nited Liability Company," the designation "LI	.C" or the abbreviation .L.U."
Enter new principal offices address, if applicable:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	A A A A A A A A A A A A A A A A A A A
(Principal office address MUST BE A STREET ADD)	RESS)	
		<u> </u>
		PH 12:
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		(2)
	//	
B. If amending the registered agent and/or regis	stered office address on our recor	ds, enter the name of the n
registered agent and/or the new registered office add		* *************************************
Name of New Registered Agent:		
New Registered Office Address:		
	önter Florida street addi	7/45
		Florida Zip Code
	Cire	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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. Thereby 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
MGR	VON KLUGES, DANIEL	600 CLEVELAND STREET. SUITE 223.	D Add
		CLEARWATER, FL 33755	
MGR	VON KLUGES, FERNANDA	600 CLEVELAND STREET, SUITE 223	
		CLEARWATER, FL 33755	
MGR	GONCALVES, DEISE	3402 ROCHELLE CT	
***************************************		CLEARWATER, FL 33761	020 M.
			် မီ ဗိုက် □ Change : · · ·
MGR	VANDRES MARTINEZ, REINALDO	3106 WINCHESTER DR.	
		DUNEDIN, FL 34698	39 Remove
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ctive date, if other than the coeffective date is listed, the date most	face of fining: be specific and cannot b	e prior to date o	f tifing or more than 6	(optional 30 days after filing) g.) Parsuant	to 605.0
e: If the date inserted in this blo inent's effective date on the De	ck does not meet the	applicable stat	tutory filing require	ements, this date	e will not l	e listec
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ecord specifies a delayed	effective date. b	ut not an ei	ffective time. a	t 12:01 a.m.	on the	earliei
ne 90th day after the reco	rd is filed.		,,,	/	/	
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Typed or printed name of signee

Filing Fee: \$25.00