12300089763

(Re	equestor's Name))
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phon	ne #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Na	me)
(De	ocument Number)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
		

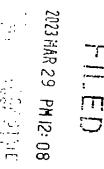
Office Use Only



900405519069

03/23/23--01009---001 **30.00

5/16/23 VW



-

COVER LETTER

	Registration Section Division of Corporations				
SUBJEC	SUBJECT: FJT PROPERTIES LLC				
,014,11.0	Name of Limited Liability Company				
The enclo	osed Articles of Amendment and fee(s) are submitted for filing.				
Please re	turn all correspondence concerning this matter to the following:				
	FRANK J. TOMASIK Name of Person				
	Name of Person				
	FIT PROPERTIES LLC				
	Firm/Company				
	695 REHATTA ROAD				
	Address				
	WAPLES, FL 34103 City/State and Zip Code				
	FJTPLOP @ GMAIL. COM				
	E-mail address: (to be used for future annual report notification)				
For furth	er information concerning this matter, please call:				
F	FRANK TOMASIK at 616 401-3317 Name of Person Area Code Daytime Telephone Number				
	Name of Person Area Code Daytime Telephone Number				

Mailing Address:

□ \$25.00 Filing Fee

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

\$30.00 Filing Fee &

Certificate of Status

Street Address:

□ \$55.00 Filing Fee &

Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

□ \$60.00 Filing Fee.

Certificate of Status & Certified Copy (additional copy is enclosed)

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now apper liability Company)	irs on our records.	7)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000089743</u> .		-1-1		_ and assigned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company h	<u>iere</u> :			
N/A					
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the	designation "LLC"	or the abbre	viation "L.L.C."	
Enter new principal offices address, if applicable:	NA				
(Principal office address MUST BE A STREET ADDRESS)			-23	2023	
			(2.3)	₹ 71	
Enter new mailing address, if applicable:	N/A		58.4 E.S.S.	IL E 8 29 P	
(Mailing address MAY BE A POST OFFICE BOX)		•	200	2 H	
				30	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our	records, <u>enter t</u>	he name o	of the new regis	
New Registered Office Address:					
110111111111111111111111111111111111111	Enter Florida street address				
	<u> </u>	, Flor	rida		
	Ciţy			Zip Code	

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 a nending 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
AMBR	LOUISE E. HOEKSPA	695 REGATTA RD. NAPLES, FL 34	<u>4/03</u> □Add
			Tremove
			□Change
	···-		□∧dd
			Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			🗆 Add
			□Remove
			□Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
		•	□ Change

_	N/A
_	
_	
_	<u> </u>
_	
_	
_	
-	
_	
_	
_	
_	
_	
_	
-	
ecti	ve date, if other than the date of filing: (optional)
effe e:	ective 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 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
	ent's effective date on the Department of State's records.
cord s file	I 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
ed	03/27/2023 g. 12:30 pm
_	
	fun L Chileto
	Signature of a member or authorized representative of a member
	FRANK J. TOMASIK Typed or printed name of signee

E. ...