L08000113727

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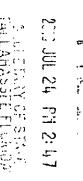
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D. BRUCE

COVER LETTER

TQ:

Registration Section
Division of Corporations

AMC HTG 1 GP, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthew Rieger

Name of Person

Matthew Rieger, P.A.

Firm/Company

3225 Aviation Ave, Ste. 602

Address

Coconut Grove, FL 33133

City/State and Zip Code

matthewr@htgf.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rodrigo Paredes

305 537-4704

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□S60.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMC HTG 1 GP, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company Florida document number $\underline{L08000113727}$.	were filed on 12/12/2008	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		273 JUL 24 Property on The Property of The Pro
B. If amending the registered agent and/or registered off	fice address on our records, enter t	e name of the new
registered agent and/or the new registered office address here	2:	## 14 %. ### 45 %.
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addi	ress
	, Florida	
	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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR	MASSIRMAN, JAY	3250 MARY STREET, SUITE 500	Add
		COCONUT GROVE, FL 33133	Remove
MBR	HTG KONOVER, LLC	3225 AVIATION AVE, SUITE 602	_ Add
		COCONUT GROVE, FL 33133	Remove
MGR	MATTHEW RIEGER	3225 AVIATION AVE, SUITE 602	_
		COCONUT GROVE, FL 33133	Remove
		7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Add
			Remove
			Add
			Remove
			Add
			Remove

If amending any other informati . `	ion, enter change(s) here: (Attach additional sheets, if necessary.)
	, and the second
JULY 17	2013
ted OOLI 17	
-	ature of a member or authorized representative of a member
MATTHEW RIEC	SER / C
	Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

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