

N0800001474  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6380  
From: Account Name : HTG UNITED, LLC  
Account Number : I20190000094  
Phone : (305)860-8188  
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2021 JUN 25 PM 3:16

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

2021 JUN 25 AM 8:41

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Email Address: Glendab@htgf.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN  
AM AFFORDABLE HOUSING, INC.

Certificate of Status	0
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JUN 28 2021

S. PRATHEF

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment  
to  
Articles of Incorporation  
of

AM AFFORDABLE HOUSING, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N08000011474

(Document Number of Corporation (if known))

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2021 JUN 25 AM 8:41  
FALLA RICHESSEE COUNTY FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

\_\_\_\_\_ *The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

B. Enter new principal office address, if applicable: \_\_\_\_\_  
(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable: \_\_\_\_\_  
(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_  
(Florida street address)

\_\_\_\_\_  
(City) Florida (Zip Code)

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

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P - President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C - Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>VP/D</u>	<u>TRACY MOURNING</u>	<u>3109 GRAND AVE PMB 447</u> <u>COCONUT GROVE, FL 33133</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	<u>VP/D</u>	<u>ALONZO H. MOURNING, III</u>	<u>3109 GRAND AVE PMB 447</u> <u>COCONUT GROVE, FL 33133</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change <input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E: If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary) (Be specific)

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There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 05/17/2021

Signature   
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

ALLEN FURST

(Typed or printed name of person signing)

TREASURER/DIRECTOR

(Title of person signing)

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2021 JUN 25 AM 8:41  
TALLAHASSEE, FL 06151