## L11000081648

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(Address)				
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## **COVER LETTER**

	Registration S Division of Co				
	·		Miomi 6 LLC	= 3100 / 00	
SUBJEC	CT:		Miami 6, LLC ted Liability Company		
The encl	osed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
		ondence concerning this matter			
			Name of Person		
Matthew Rieger, P.A.					
			Firm/Company		
		3225	5 Aviation Ave., Ste.	602	
			Address		
			Miami, FL 33133		
			City/State and Zip Code		
		E-mail address: (0	mattr@htgf.com	port notification)	
For furth	ner information	concerning this matter, please c	ail:		
		atthew Rieger	at (_305_)	537-4684	
	Name (	of Person	Area Code &	& Daytime Telephone Number	
Enclosed	is a check for t	the following amount:			
\$25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is a	enclosed) Certificate of Certified Co	of Status &
	Regist Divisio	JNG ADDRESS: ration Section on of Corporations tox 6327	Registratio	f Corporations	

Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT FILED ARTICLES OF ORGANIZATION HTG Miami 6. LLC (Name of the Limited Liability Company as it now appears on our records.) ... - (A Florida Limited Liability Company) 07/15/2011 and assigned The Articles of Organization for this Limited Liability Company were filed on \_\_ L11000081648 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = M	nager Ianaging Member	-		
<u>Title</u>	<u>Name</u>	Address	Type of Action	
MGRM	Housing Trust Group, LLC	3225 Aviation Ave., Ste. 602 Coconut Grove, FL 33133	Add Remove	
<u>MGRM</u>	HTG Affordable Partners, LLC	3225 Aviation Ave., Ste. 602 Coconut Grove, FL 33133	✓ Add ☐ Remove	
			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
D. If amend	ling any other information, enter change	(s) here: (Attach additional sheets, if necessa	FILED  11 NOV 29 PH 12: 15  SECRETARY OF STATE  ALAMASSEE, FLORIDA	
Dated	November 21 , 201			
	-	atthew Rieger	<del></del>	
	Typed o	r printed name of signee		

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