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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

HTG FORT LAUDERDALE, 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

Firm/Company

3225 AVIATION AVENUE, SUITE 602

Address

MIAMI, FL 33133

City/State and Zip Code

MATTR@HTGF.COM

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

For further information concerning this matter, please call:

MATTHEW RIEGER

305,537-4684

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)

□\$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 Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HTG FORT LAUDERDALE, LLC		<u></u>
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L11000124867	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
N/A		
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designation "l	LLC" or the abbreviation
Enter new principal offices address, if applicable:	3225 AVIATION AVENUE	. 22
(Principal office address MUST BE A STREET ADDRESS)	SUITE 602	5 6m K 1
	MIAMI, FL 33133	TIN MEN
		F
Enter new mailing address, if applicable:	3225 AVIATION AVENUE	
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 602	
	MIAMI, FL 33133	202
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:		the name of the ne
New Registered Office Address:	Enter Florida street ada	lwans.
	erner r tortaa street daa	r vss
	, Florida	7: 0.1
	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 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> VP	Name DWAYNE WALKER	Address 3225 AVIATION AVENUE, STE 602	Type of Action
		MIAMI, FL 33133	Add Remove
<u>VP</u>	ELENA ADAMES	3225 AVIATION AVENUE, STE 602	Add
		MIAMI, FL 33133	_ Remove
			_ Add
			Remove
	-		Add Remove
			Add
			Add
			Remove

D. If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
_	
_	
-	
ated	11/8
	Signature of a member or authorized representative of a member
•	MATTHEW RIEGER
	Typed or printed name of signee

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Filing Fee: \$25.00

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