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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

HTG AFFORDABLE PARTNERS II, 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 AVENUE, STE 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:		
	at ()	
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)

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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 AFFORDABLE PARTNERS II, 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 Liabi	lity Company were filed on 11/21/2011	and assigned	
Florida document number <u>L11000132449</u>			
This amendment is submitted to amend the followi	ng:		
A. If amending name, enter the new name of the	e limited liability company here:		
The new name must be distinguishable and end with the word	ds "Limited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."	_
Enter new principal offices address, if applicable	e:		_
(Principal office address MUST BE A STREET A	(DDRESS)		_
Enter new mailing address, if applicable:			_
(Mailing address MAY BE A POST OFFICE BO.	<u> </u>		_
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the address here:	he name of the	new
Name of New Registered Agent:	·	284	
New Registered Office Address:	A 1		i j
New Registered Office Address.	Enter Florida street address	35 2 C	-
	, Florida	<u> </u>	
Non-Border and Ass. 42 Ct. 4 Ct. 4 Ct. 4 D. 4	City ·	ZplCode :	<u>,</u> j
New Registered Agent's Signature, if changing Regi	stered Agent:	5 6	
provisions of all statutes relative to the proper a accept the obligations of my position as register	gent and agree to act in this capacity. I further agre and complete performance of my duties, and I am fa red agent as provided for in Chapter 605, F.S. Or, ij istered office address, I hereby confirm that the limi	miliar with and Tthis document is	

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
<u>P</u>	RIEGER, RANDY	3225 AVIATION AVENUE	= □ Add	
		SUITE 602	■ Remove	
		COCONUT GROVE, FL 3313	33	
VP, S	RIEGER, MATTHEW	3225 AVIATION AVENUE	□ Add	
		SUITE 602	Remove	
		COCONUT GROVE, FL 3313	3	
<u>VP</u>	ADAMES, ELENA	3225 AVIATION AVENUE	= □ □ Add	
		SUITE 602	■ Remove	
		MIAMI, FL 33133		
VP_	RIEGER, MATTHEW	3225 AVIATION AVENUE	_ □ Add	
		SUITE 602	Remove	
		COCONUT GROVE, FL 3313	D punting	
ST	SARIOL, MARIO	3225 AVIATION AVENUE	3 P. Add	
		SUITE 602	∑: E Remove	
		COCONUT GROVE, FL 3313	3	
<u>T</u>	SARIOL, MARIO	3225 AVIATION AVENUE	E □ Add	
		SUITE 602	_ ≡ Remove	
		COCONUT GROVE, FL 3313	3	

D. If amendir	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
 .	
	•
E. Effective d	date, if other than the date of filing: (optional) date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
	date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after document is filed by the Florida Department of State)
Dated M	AY 21st 2014 _c
Dated	
_	Signature of a member or authorized representative of a member
_	MATTHEW RIEGER
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2014 JUN 23 PH 2: 40