Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name : HTG AFFORDABLE, LLC

Account Number : 120150000094 Phone : (305)860-8188

Fax Number : (305)856-1475

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Glendabahtgf.com

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Electronic Filing Menu

Corporate Filing Menu

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MAR D 1 2017

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compar	ıy aş it now appears on our reco	rds,)	
(A Florida Limited L	• • •		
The Articles of Organization for this Limited Liability Company	the Articles of Organization for this Limited Liability Company were filed on 08/03/2012		
Florida document number L12000100368			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
		. 22	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "Ll	.C' or the abbreviation L.L.C."	
Enter new principal offices address, if applicable:	<u></u>		
(Principal office address MUST BE A STREET ADDRESS)		75 Z	
		Fig	
Enter new malling address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)) A	
		and the second s	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:	fice address on our recor	ds, enter the name of the nev	
New Registered Office Address:			
	Enter Florida street addi	ress	
	, Florida		
New Registered Agent's Signature, if changing Registered Agent:	Cay	asy cone	
	es es act in this canacity. I	further cores to comply with the	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, provided for in Chapter 602	and I am familiar with and 5, F.S. Or, if this document is	
10.00	Deitard Cont Signature	of New Begintered Agent	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	RIEGER, MATTHEW	3225 AVIATION AVE. STE 602	
		COCONUT GROVE, FL 33133	■ Remove
			☐ Change
MGR	RIEGER. MATTHEW	3225 AVIATION AVENUE	
		STE 602	☐ Remove
		COCONUT GROVE, FL 33133	☐ Change
			□ Remove
			Change
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			Add— Add— Add— ARRY OF TO Remind
			OF STATE Change

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Effective t	date, if other than th	ne date of filing:			_(optional)	
f an elfectiv Note: If th	re date is listed, the date me date inserted in this s effective date on the	nust be apecific and ca block does not mee	nnot be prior to date of it the applicable stat	f filing or more than 90 c	days after filing.) Pursua ents, this date will no	nt to 605.0207 () t be listed as th
e record The 90	l specifies a delay th day after the re	ed effective dat ecord is filed.	e, but not an ef	fective time, at 1	.2:01 a.m. on the	e earlier of:
Dated Feb	ruary 28	<u></u>	2017			
		110			1942 1947 1948 1944 1944 1944 1944	
		Signature of a mer	nber or authorized ter	presentative of a membe		
	Matthew Rieger				35 A	
		Ту	yped or printed name of	of signee	T POP	m
					rmich	L.J
			Page 3 of 3		OF STATE	