Biorda Department of State Division of Corporations Electronic Filings deep Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : HTG UNITED, LLC Account Number : I20190000094

Phone

: (305)860-8188

Fax Number

: (305)639-8427

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

Email Address: alendabahtafian

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AMC HTG 3 MM, LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

TGI ASS Help

OCT IC LUI

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMC HTG 3 MM, LLC							
(Name of the Limited Liability Co (A Florida Lim	ompany as it new appears on our records.) uted Liability Company)						
The Articles of Organization for this Limited Liability Comp	pany were filed on 07/18/2013	and assigned					
Florida document number L13000102193							
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 contain the words "Limited I	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	<u> </u>	201					
		. 2					
		—; 1 — [] is a					
Enter new mailing address, if applicable:							
(Mailing address MAY BE A POST OFFICE BOX)							
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on our records, <u>e</u> <u>bere</u> :	nter the name of the ne					
Name of New Registered Agent:							
New Registered Office Address:							
	Enter Florida street address						
	, Florid						
	Citv	7 in 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 605, 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 Changing Registered Agent, Signature of New Registered 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

Title	<u>Name</u>	Address	Type of Action
MGR	Randy Rieger		
		3225 Aviation Ave Suite 602 Miami, FL 33133	Remove
			D Add
			☐ Remove
			- O Add
			□ Remove
			-:
			Remove
			Change
			D Add
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Effective date, if other than the date of filin If an effective date is listed, the date must be specific an Note: If the date inserted in this block does not a document's effective date on the Department of	ei cannot be prior to date meet the applicable s	e of filing or more than 90 tatutory filing requiren	(optional) days after filing.) Purs ments, this date will r	uant to 605.020 not be listed a
		effective time, at	12: 01 a.m. on t	he earlier o
he record specifies a delayed effective	date, but not an	.,		
the record specifies a delayed effective of the 90th day after the record is filed. Dated	date, but not an	•		
the record specifies a delayed effective to The 90th day after the record is filed.	date, but not an	,		

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