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: glendab@htgf.com

OCT -7 AM 8: 1

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HTG HARBOR DEVELOPER, LLC

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OCT 0 8 2020

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HTG Harbor Developer, LLC		
(Name of the Limited Liabilit (A Florida	y Company as it now appears on our records.) Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability C	ompany were filed on 11/01/2016	and assigned
Florida document number L16000201383	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ited Liability Company," the designation "LLC" or ti	1e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	
·		
Enter were molling address if applicables		-j
Enter new mailing address, if applicable:		ದು
(Mailing address MAY BE A POST OFFICE BOX)		
	1 -55	of the new registored
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the i	taine of the new registered
agent and of the hot, 192 May 24 August and 200 Mer.		7 .
		٠٠٠ <u>٢</u> ٢
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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 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 Avenue, 6th Floor	□Add
		Coconut Grove, FL 33133	\ \ \ \ \Remove
			Change
			□Add
			□Remove
			□Change
			□Remove
			Change
			□Add
	•		□Remove
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			[]Add
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			□Add
			Remove
			Change

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Note:	If the date inserte	r than the date of the date must be specified in this block does to on the Departmen	not meet the applic	able statutory filing	c than 90 days after filin requirements, this da	l) g.) Pursuant to 605.0207 te will not be listed as
e recon		yed effective date, bu	It not an effective t	ime, at 12:01 a.m. or	the earlier of: (b)	The 90th day after the
Dated	October	1	, 2020	 11/		
		Signature	e of a member or auth	orized representative o	f a member	<del></del>
				<b>/</b> } ^		

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