

L16000213 L152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

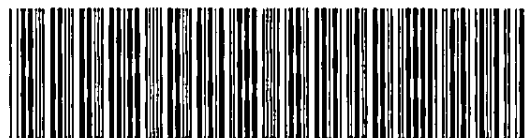
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

JF
10/13/17

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HTG Anderson Terrace, 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, Suite 602

Address

Coconut Grove, Florida, 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:

Glenda Brown

Name of Person

786 347-4542
at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Anderson Terrace, 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 Liability Company were filed on November 21, 2016 and assigned Florida document number L16000213452.

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 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Matthew Rieger	3225 Aviation Avenue, Suite 602	<input type="checkbox"/> Add
		Coconut Grove, FL 33133	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Randy Rieger	3225 Aviation Avenue, Suite 602	<input type="checkbox"/> Add
		Coconut Grove, FL 33133	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	Matthew Rieger	3225 Aviation Avenue, Suite 602	<input checked="" type="checkbox"/> Add
		Coconut Grove, FL 33133	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	Randy Rieger	3225 Aviation Avenue, Suite 602	<input checked="" type="checkbox"/> Add
		Coconut Grove, FL 33133	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	HTG Anderson Terrace Manager, LLC	3225 Aviation Avenue, Suite 602	<input checked="" type="checkbox"/> Add
		Coconut Grove, FL 33133	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated October 10, 2017

Signature of a member or authorized representative of a member

Matthew Rieger

Typed or printed name of signee