Florida Department of State Privision of Componitions 273

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Division of Corporations

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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@htyf.com

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION (**OF**

HTG Lafayette, LLC	Company as is now appears on our records.)	
(Name of the Limited Liability (A Florida Li	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Cor Florida document number L18000241273	mpany were filed on October 11, 2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	, 2
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The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the	abbreviation "In C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u> </u>	3
		到 31
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addr	ered office address on our records, <u>en</u> ess here:	ter the hante of the new
Name of New Registered Agent:		<u></u>
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>	Name	<u>Address</u>		Address Type of /		
MGR	Matthew Rieger		Add			
		3225 Aviation Avenue, 6th floor Coconut Grove, FL 33133	■ Remove			
			Change			
MGR	Randy Rieger					
		3225 Aviation Avenue, 6th floor Coconut Grove, FL 33133	■ Remove			
			☐ Change			
MGR	HTG Lafayette Manager, LLC	3225 Aviation Avenue, 6th floor Coconut Grove, FL 33133	□ Add			
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