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To:

Division of Corporations

Fax Number

: (850)61/26383

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

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

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DEC SO SOLO

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HTG Shoreview Developer, LLC			
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our red d Liability Company)	cords.)	
The Articles of Organization for this Limited Liability Compa	ny were filed on 9/16/2019	and assigned	
Florida document number L19000225950			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li-	ability company here:		
The new name must be distinguishable and contain the words 'Limited Lia	bility Company," the designation "I	LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
		200	
		050	
Enter new mailing address, if applicable:		152 -	
(Mailing address MAY BE A POST OFFICE BOX)		SE P III	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>en</u>	ter the name of the new regis	
		•	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		Florida	
	Ciţ.	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	Address	Type of Action
MGR	Randy Rieger	3225 AVIATION AVENUE, 6TH FLOOR COCONUT GROVE, FL 33133	• Add
			□Remove
			Change
			□Add
			□ Remove
			Change
		□Add	
			□Remove
		Change	
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			□Change
			□Add
			□Remove
			DChange
			□Add
			□Remove
			Change

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. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	·
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•	·
Note:	ive date, if other than the date of filing: (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as sent's effective date on the Department of State's records.
the red	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	
	$\wedge \wedge \bigcirc$
	Signature of a member or authorized representative of a member
	Matthew Rieger Typed or printed name of signer

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Filing Fee: \$25.00