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Florida Department of State
Division of Corporations
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To:

Division of Corporations
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From:

Account Name : HTG UNITED, LLC
Account Number : I20190000094
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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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SHOREVIEW PLACE LLC

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DEC 13 2019

TELEPHONE

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

Shoreview Place, 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 10/01/2019 and assigned
Florida document number L19000247459.

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

City

, Florida

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

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, 6th Floor Coconut Grove,	<input type="checkbox"/> Add
		FL 33133	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	HTG Shoreview Manager, LLC	3225 Aviation Avenue, 6th Floor Coconut Grove,	<input checked="" type="checkbox"/> Add
		FL 33133	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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