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To:

Division of Corporations

Fax Number

: (850)617-6383

FEB 28 TELFrom:

Account Name : HTG UNITED, LLC Account Number : 120190000094 Phone : (305)860-8188 Fax Number : (305)639-8427

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 JACKSBORO DEVELOPER, LLC

| Certificate of Status | 0       |
|-----------------------|---------|
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Electronic Filing Menu

Corporate Filing Menu

Help

.

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020 FT 27 PH 1:10

If Changing Registered Agent, Signature of New Registered Agent

HTG Jacksboro Developer, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

| 2-24-2020                 | and assigned                  |
|---------------------------|-------------------------------|
|                           |                               |
|                           |                               |
| here:                     |                               |
| designation 'LLC' or      | he abbreviation "L.L.C."      |
|                           |                               |
|                           |                               |
|                           |                               |
|                           |                               |
|                           |                               |
|                           | <u> </u>                      |
| records, <u>enter the</u> | name of the new registere     |
|                           |                               |
|                           |                               |
| onda street address       |                               |
|                           |                               |
| onda street address       |                               |
| onda street address       |                               |
|                           | here:  designation "LLC" or t |

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      | Matthew Rieger           | 3225 Aviation Avenue, 6th Floor<br>Coconut Grove, FL 33133 | □Add           |
|          |                          |  | ■Remove        |
|          |                          |  | Change         |
| MGR      | Randy Rieger             | 3225 Aviation Avenue, 6th Floor<br>Coconut Grove, FL 33133 |                |
|          |                          |  | ■Remove        |
|          |                          |  | Change         |
| AMBR .   | HTG Texas Developer, LLC | 3225 Aviation Avenue, 6th Floor<br>Coconut Grove, FL 33133 | ≅Add           |
|          |                          |  | □Remove        |
|          |                          |  |                |
| <u> </u> |                          |  | □Abd           |
|          |                          |  | □Remove        |
|          |                          |  | □Change        |
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|          |                          |  | Remove         |
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| Affective date, if other than the difference of the date must be an effective date is listed, the date must be a listed. If the date inserted in this block locument's effective date on the Department's effective date on the Department's effective date. | be specific and connot be<br>ck does not meet the a | prior to date of filing op<br>oplicable statutory i | or more than 90 days after f | ling.) Pursuant to 605.020                         |
| record specifies a delayed effective<br>d is filed.  | date, but not an effecti                            | ve time, at 12:01 a                                 | m. on the earlier of: (b)    | The 90th day after the                             |
| ated February 26   | 2020  |   |                              |  |
| ng.  | · ,   |   |                              |  |
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|  | ignature of a member or                             | authorized represents                               | tive of a member             | · · · · · · · · · · · · · · · · · · ·              |

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