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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HTG UNITED, LLC
Account Number : 120190000094
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 TALLMAN VILLAS DEVELOPER, LLC

Certificate of Status	0
Certified Copy	0
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

HTG TALLMAN VILLAS DEVELOPER, LLC

(Name of the Limited Liab (A Flor	il <mark>ity Company as it now appears on our record</mark> ida Limited Liability Company)	<u>(s.</u>)
The Articles of Organization for this Limited Liability	Company were filed on 09/23/2020	and assigned
Florida document number L20000300643	·	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the li</u>	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited 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 ADI	ORESS)	
Enter new mailing address, if applicable:		 25
(Mailing address MAY BE A POST OFFICE BOX)		
		·
		. 7
 If amending the registered agent and/or register agent and/or the new registered office address here 	ed office address on our records, <u>enter</u>	the name of the new regis
agent and of the new registered office address here		$\ddot{\wp}$
Name of Name Bankaned Access		43
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	i
	Flo	orida
	Cuy	Zip Code

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>	Type of Action
MGR	Randy E. Rieger	3225 Aviation Ave, 6th Floor	≣ Add
		Coconut Grove, FL 33133	□Remove
			□ Change
			□Remove
		- · · · · · · · · · · · · · · · · · · ·	Change
		-	□Remove
			□ Change
			□Remove
			Change
			□Add
			Remove
			Change
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an effective dat	if other than the date of is listed, the date must be spec	cific and cannot be prior to	date of filing or more tha	(optional) n 90 days after filing.) Purs	uant to 60\$.0207
<u>lote:</u> If the da	e inserted in this block doe ective date on the Departme	es not meet the applical	ole statutory filing requ	irements, this date will i	not be listed as
record specifi	s a delayed effective date, b	but not an effective tim	ie, at 12:01 a.m. on the	earlier of: (b) The 90t	h day after the
i is ilied.					
	November	27 , 2023			
	11/1)			
d is filed. Dated	11/1)		ember	······

Filing Fee: \$25.00