

L21000354093

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H21000296546 3)))



H210002965463ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

21 AUG -5 PM 12:43

FILED

To: Division of Corporations  
Fax Number : (850)617-6381

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

FLORIDA LIMITED LIABILITY CO.  
HTG Oasis Member, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

2021 AUG -5 PM 3:37

Electronic Filing Menu

Corporate Filing Menu

Help

0 AUG 2021  
10:00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

HTG Oasis Member, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

3225 Aviation Ave  
6th Floor  
Coconut Grove, FL 33133

3225 Aviation Ave  
6th Floor  
Coconut Grove, FL 33133

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Matthew Rieger, P.A.  
Name

3225 Aviation Ave, 6th Floor  
Florida street address (P.O. Box **NOT** acceptable)

Coconut Grove      FL      33133  
City                      State                      Zip

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

21 AUG -5 PM 12:43

LLC

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

Manager

Matthew Rieger  
3225 Aviation Ave. 6th Floor  
Coconut Grove, FL 33133

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

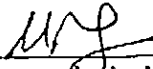
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.  
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, P.S.

Matthew Rieger  
Typed or printed name of signee

21 AUG -5 PM 12:43  
STATE OF FLORIDA  
TALLAHASSEE

**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)