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To:

Division of Corporations

Fax Number : (850)617-6383

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 OAK HILLS DEVELOPER, LLC

Certificate of Status	0
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NOV 28 2023

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

## HTG OAK HILLS DEVELOPER, 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 07/26/2023  Florida document number L23000380331	and assigned
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 a	bbreviation "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, <u>enter the nan agent and/or the new registered office address here</u> :	ne of the new registered
Name of New Registered Agent:	
New Registered Office Address:  Enter Florida street address	
Florida Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	- r

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 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>	Address	Type of Action
MGR	Randy E. Rieger	3225 Aviation Ave, 6th Floor	
		Coconut Grove, FL 33133	□Remove
		····	□ Change
			□Remove
			☐ Change
		<del></del>	🗆 Add
			□Remove
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cord specifie s filed.	i a delayed effective	: date, but not an e	ffective time, at 1	2:01 a.m. on the car	lier of: (b) The 90th	day after th
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Filing Fee: \$25.00