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.

(((H23000401470 3)))



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

To:

Division of Corporations

Fax Number : (850)617-6383

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.

Clandah@htsf.com

Email Address: Glendab@htgf.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HTG UNION BAPTIST DEVELOPER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

H8362 8 2 VON

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HTG UNION BAPTIST 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 09/08/2023 Torida document number L23000419087	and assigned
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
he 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)	
3. If amending the registered agent and/or registered office address on our records, enter the nar gent and/or the new registered office address here:	ne of the new registo
gen and general registered office address fiere.	÷
Name of New Registered Agent:	
New Registered Office Address:	- 2
New Registered Office Address: Enter Florida street address	<u> </u>
	. 9

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.

Cin

If Changing Registered Agent, Signature of New Registered Agent

. Florida <u> </u>

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	■ Add
		Coconut Grove, FL 33133	□Remove
			□ Change
			□Add
			□Remove
			Change
		□Remove	
			Change
			□ Add
			□Remove
			□Change
		□ Add	
			□Remove
			□ Change
			□Add
			□Remove
			□ Change

•	
,	
•	
-	
••	
•••	
(Footi	ve data if ather than the data of CV-
an offi ote:	ve date, if other than the date of filing: (optional) crive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
record is file	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
ated .	November 27 , 2023
	11/2
	Sensure of a member or authorized representative of a member
	
	Matthew A. Rieger

Filing Fee: \$25.00