L10000123599

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M. MILLIGAN EXAMINER

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COVER LETTER

		istration Section porations	on Division of			٧	* · · · · · · · · · · · · · · · · · · ·	' 3
SUBJEC	CT:	Raymond Jan	nes Tax Credit Fund 37 L Name of Lin	. L.C. nited Liability Compa	any			
The enclo	osed	Articles of Am	endment and fee(s) are sub	mitted for filing. P	lease retu	rn all corresp	oondence concerning thi	is
matter to	the t	following:						
			Wil	liam K. Budd	<u>.</u>			
				Name of	Person			
			Ray	mond James Tax Credit Firm/Co		<u></u>		
			886) Carillon Parkway, De Addr				
			Sai	nt Petersburg, Florida City/State and	33716			
			Ril	l.Budd@RaymondJam	•	•		
			E-mail address:	(to be used for future	annual rep	ort notification	on)	
For furth	er in	formation cond	erning this matter, please c	all:				
		William K. B		at (<u>727</u>)		567-4820		
		Name of Po	erson	Area Co	ode	Daytime Tel	ephone Number	
Enclosed	i is a	check for the f	ollowing amount:					
⊠\$25.00	0 Fil	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filin Certified C (additional co	Сору	ed)	□ \$60.00 Filing Fee, Certificate of State Certified Copy (additional copy is enc	

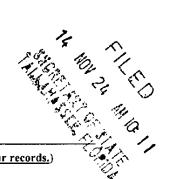
MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Zip Code

Raymond James Tax Credit Fund 37 L.L.C.

(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 12/01/2010 and assigned Florida document number L10000123599.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of	of the limited liability c	ompany here:
The new name must be distinguishable and end with the	words "Limited Liability C	ompany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	Not Applicable
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable:		Not Applicable
(Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	
B. If amending the registered agent and new registered agent and/or the new register	_	address on our records, <u>enter the name of the</u>
Name of New Registered Agent:	Not Applicable	
New Registered Office Address:		Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

C. If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title Action	Name	Address	Type of
	Not Applicable		Add
			Add
			Remove
			Remove
			Remove
			Add
			☐ Remove
			Add
			□ Remove
			

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
This limited liability company is manager-managed.	
E. Effective date, if other than the date of filing:	
Dated November 12, 2014	energy com
Signature of a member or authorized representative of a member	
Steven J. Kropf, President of Raymond James Tax Credit Funds, Inc., authorized representative	
Typed or printed name of signee	

Page 3 of 3 Filing

Fee: \$25.00

