

L12000145124 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

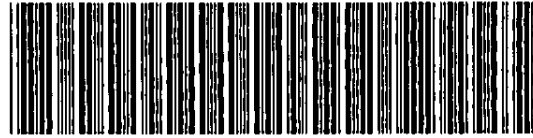
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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B. BOSTICK

APR 29 2013

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RJ HOF 24-Holly Point L.L.C.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

William K. Budd
Name of Person

Raymond James Tax Credit Funds, Inc.
Firm/Company

880 Carillon Parkway, Dept. 05485
Address

Saint Petersburg, Florida 33716
City/State and Zip Code

Bill.Budd@raymondjames.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William K. Budd at (727) 567-4820
Name of Person Area Code & Daytime Telephone Number

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Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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**

RJ HOF 24-HOLLY POINT 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 11/16/2012 and assigned Florida document number L12000145124.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Not applicable

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

Not applicable

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

Not applicable

(Mailing address MAY BE A POST OFFICE BOX)

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2018 APR 26 PM 5:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Not applicable

New Registered Office Address:

Not applicable

Enter Florida street address

Florida

City

Zip Code

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

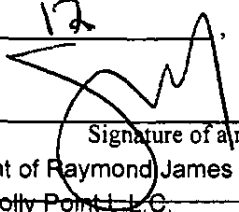
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Raymond James Tax Credit Fund XX L.L.C.	880 Carillon Parkway	<input type="checkbox"/> Add
		Dept. 05485	<input checked="" type="checkbox"/> Remove
MGRM	Raymond James Housing Opportunities Fund 24 L.P.	Saint Petersburg, FL 33716 880 Carillon Parkway	<input checked="" type="checkbox"/> Add
		Dept. 05485	<input type="checkbox"/> Remove
		Saint Petersburg, FL 33716	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Not applicable

Dated April 12, 2013



Signature of a member or authorized representative of a member

Steven J. Kropf, President of Raymond James Tax Credit Funds, Inc., the sole member of the general partner of the managing member of RJHOF 24-Holly Point L.L.C.

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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2013 APR 26 PM 5:30
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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 18, 2013

WILLIAM K. BUDD
RAYMOND JAMES TAX CREDIT FUNDS, INC.
880 CARILLON PARKWAY, DEP. 05485
ST. PETERSBURG, FL 33716

SUBJECT: RJ HOF 24-HOLLY POINT L.L.C.
Ref. Number: L12000145124

We have received your document for RJ HOF 24-HOLLY POINT L.L.C. and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The enclosed Articles of Amendment do not reflect any amendment changes.

*- Page 2 was
erroneously
omitted
Now attached.*

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 613A00009325

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TALLAHASSEE, FLORIDA

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