L23000028625

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(223, 13,
(Document Number)
Certified Copies Certificates of Status
5
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COVER LETTER

Division of Cor		•	
RJ MT Ger	rald Ford Apartments L.L.C.		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Justin Mayor		
		Name of Person	
	Raymond James Affordable	e Housing Investments, Inc.	
		Firm/Company	
	880 Carillon Parkway		
		Address	
	St. Petersburg, FL 33716		
		City/State and Zip Code	
	justin.mayor@raymondjamo	es.com to be used for future annual report notifi	cation)
For further information of	concerning this matter, please ca	·	
Justin Mayor		727 567-3162	
_	of Person		Telephone Number
		•	•
Enclosed is a check for t	he 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 Addre Registration		Street Address: Registration Sec	tion

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

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RJ MT Gerald Ford Apartments L.L.C.	
(Name of the Limited Liab (A Flor	ility Company as it now appears on our records.) ida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number L23000028625	Company were filed on January 13, 2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited liability company here:
N/A	
he new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
Principal office address MUST BE A STREET ADI	DRESS)
	N/A
Enter new mailing address, if applicable:	THE STATE OF THE S
Mailing address MAY BE A POST OFFICE BOX	
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our records, enter the name of the new register:
Name of New Registered Agent: N/A	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Enter Florida street address
	} .
	City Florida Zip Code
New Registered Agent's Signature, if changing Registe	<u> </u>

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	Raymond James Tax Credit Fund XX L.L.C.	880 Carillon Parkway	□Add
		St. Petersburg, FL 33716	=Remove
			□Change
MGR	RJTCF-51 L.L.C.	880 Carillon Parkway	≣Add
		St. Petersburg, FL 33716	☐ Remove
			Change
	·		□Add
		 	Remove
			□Change
			□Add
			□ Remove
			□ Change
			□Add
		□ Remove	
			Change
			□Add
			□Remove
			□ Change

N/A 		

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n effective dat ote: If the da	c, if other than the date of filing:	al) ing.) Pursuant to 605.020 ate will not be listed a
ecord specifi s filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day after the
Septemb	per 1 , 2023 ,	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00