L230000 862413

(Requestor's Name)
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COVER LETTER

TO: Registration Division of C										
CLUB TE OTC	Heritage Oaks L.L.C.									
SUBJECT:	Name of Lim	ited Liability Company								
	of Amendment and fee(s) are sub	_								
ricase return air corres	Justin Mayor	to the following.								
		Name of Person								
	Raymond James Affordab	le Housing Investments, Inc.								
Firm/Company										
	880 Carillon Parkway									
		Address								
	St. Petersburg, FL 33716									
	Justin.Mayor@raymondjan	City/State and Zip Code								
	E-mail address: (to be used for future annual report notif	ication)							
For further informatio	n concerning this matter, please c	all:								
Justin Mayor		727 567-3162 at ()								
Nam	ne of Person	Area Code Daytime	e Telephone Number							
Enclosed is a check for	or 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 Add	lress:	Street Address:								

TO:

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 Heritage Oaks L.L.C.		
(Name of the Limited Li (A F	ability Company as it now appears on our re orida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liabil Clorida document number L23000086243	ity Company were filed on February 16,	2023 and assigned
his amendment is submitted to amend the following	g:	
a. If amending name, enter the new name of the	limited liability company here:	
N/A		
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	.: <u>N/A</u>	222
Principal office address MUST BE A STREET A	DDRESS)	-L-
		25 .
		4.**
inter new mailing address, if applicable:	N/A	—————————————————————————————————————
Mailing address MAY BE A POST OFFICE BOX	n	<u>r.</u>
vidiling uddress MAT BE A FOST OFFICE BOX		
3. If amending the registered agent and/or regis agent and/or the new registered office address he		nter the name of the new registe
Name of New Registered Agent:	N/A	
New Registered Office Address:		
	Enter Florida street a	uddress
_		_, 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 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 Changing Registered Agent, Signature of New Registered Agent

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	
		St. Petersburg, FL 33716	■ Remove
			□Change
MGR	Raymond James Community Reinvestment Fund 1 L.L.C.	880 Carillon Parkway	≘Add
		St. Petersburg, FL 33716	□Remove
			□ Change
			□Add
			□Remove
			Change
			□Remove
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			Change
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ective (date, if othe	er than ti	ne date o	f filing	:		-			(ор	tional)		
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ument'	's effective d	ate on the	Departme	ent of St	tate's rec	cords.		- , .	, ,	,			
	ecifies a dela	iyed effec	tive date,	but not	an effect	tive time	e, at 12:	01 a.m. o	on the ca	rlier of:	(b) Th	e 90th da	y after the
s filed.													
Fel	oruary 8				2024								
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			Signatu	re of a n	nember of	authori	zed renre	sentative	of a men	ber			
	Steven J. Kro	_4 # . ~	-		nember o	(`	\ '			an of D	^DE111	C the

Filing Fee: \$25.00