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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RAYMOND JAMES TAX CREDIT FUND VI LTD.  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

**DOCUMENT NUMBER:** A96000002289

The enclosed Statement of Dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

William K. Budd

(Contact Person)

Raymond James Tax Credit Funds, Inc.

(Firm/Company)

880 Carillon Parkway, Dept. 05485

(Address)

Saint Petersburg, FL 33716

(City, State and Zip Code)

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For further information concerning this matter, please call:

William K. Budd at ( 727 ) 567-4820

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

☐ \$52.50 Filing Fee

☒ \$105.00 Filing Fee and Certified Copy.

**STREET ADDRESS:**

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

**MAILING ADDRESS:**

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

CR2E118 (01/06)

**STATEMENT OF DISSOCIATION  
FOR  
GENERAL PARTNER  
OF  
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

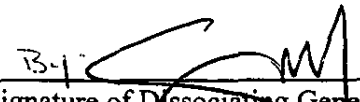
Pursuant to the provisions of section 620.1605, Florida Statutes, the undersigned general partner hereby dissociates from the following limited partnership or limited liability limited partnership:

1. The name of Limited Partnership or Limited Liability Limited Partnership is:

RAYMOND JAMES TAX CREDIT FUND VI LTD.

2. The name of the dissociating general partner is:

RAYMOND JAMES PARTNERS, INC.

B-1  
  
Signature of Dissociating General Partner  
Steven J. Repp, Vice President

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