L12000072693

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M. MILLIGAN EXAMINER

DEC - 3 2014

COVER LETTER

TO: Registration Se Corporations	ection Division of	·	
SUBJECT: RJTCF 38	- Mamou II L.L.C. Name of Lim	ited Liability Company	
		Businey Company	
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing. Please re	turn all correspondence concerning this
matter to the following:			
	Willi	iam K. Budd	
		Name of Person	
	Rayr	nond James Tax Credit Funds, I Firm/Company	nc.
	880	Carillon Parkway, Dept. 0548: Address	5
	Sain	t Petersburg, Florida 33716	
	Rill	City/State and Zip Co Budd@RaymondJames.com	de
	E-mail address: (1	to be used for future annual r	eport notification)
For further information c	oncerning this matter, please ca	11:	
William K	C. Budd of Person	at (727) Area Code	567-4820 Daytime Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl	Certificate of Status &

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

our records.)

RJTCF 38- Mamou II 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 <u>05/31/2012</u> and assigned Florida document number L12000072693.

This amendment is submitted to amend the following:

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

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

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	<u>Name</u>	Address	Type of
 -	Not Applicable		
			Remove
			Add
			□ Remove
			□ Add
			☐ Remove
			F 100 240
			Remove
			हिन्त <u></u>
			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: (optional) (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)	
Dated November 12, 2014	वेन्त्रण् राज्य र वर्षेत्र
Signature of a member or authorized representative of a member	
Steven J. Kropf, President of Raymond James Tax Credit Funds, Inc., authorized representative	

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Fee: \$25.00