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(Re	equestor's Name)					
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

RJCHOF III Investor L.L.C.

(Name of Limited Liability Company)

The enclosed Articles of Dissolution 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. 20485 (Address) Saint Petersburg, FL 33716

(City/State and Zip Code)

For further information concerning this matter, please call:

William K. Budd

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution & 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 DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is					
	RJCHOF III Investor L.L.C.		·	<u> </u>		
	The Articles of Organization	were filed on 2/27/2014		and assigned		
	document number L1400003	3625	_			
•	The delayed effective date the (effective of Note: If the date inserted in the listed as the document's effective of the listed as the document's effective date the listed as the listed as the document's effective date the listed as t	fate cannot be prior to or more is block does not meet the	e than 90 days later than date do applicable statutory filing re	ocument is received for filing) quirements, this date will not be		
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 05.0707, Florida Statutes, (copy 605.0707 on back cover letter).					
	605.0701(2)- This limited liability company is dissolved and its activities and affairs are being					
	wound up with the consent of	f all of the members of this	limited liability company.			
				N S		
				AON.		
	If there are no members, enter activities and affairs:	er the name and address on N/A	of the person appointed to	wind up the company's	Manny.	
				8: 5.7 STATE CORIDA	-4.57	
s	Signature of an authorized peted above to wind up the com	erson or if there are no m pany's activities and aff	nembers, the signature of tairs:	the person appointed and		
	<i>∕</i> .∧			ent of Raymond James Tax ger of the limited liability c		
_	Signature		Printed 1	Name		
		FILING F	EE: \$25.00			