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(D.	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
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Special Instructions to	Filing Officer:	
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J. HARRIS

· COVER LETTER

Division of C	orporations		
	34-PARDEE UNIT 24 L.L.C.		
SUBJECT:	Name of Limi	ted Liability Company	····
The enclosed Articles	of Amendment and fee(s) are sub	nitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	William K. Budd		
		Name of Person	
	Raymond James Tax Credi	t Funds, Inc.	
		Firm/Company	
	880 Carillon Parkway, Dep	ot. 05485	
		Address	
	Saint Petersburg, FL 33716	5	
		City/State and Zip Code	
	bill.budd@raymondjames.c	om to be used for future annual report notific	ation
For further information	n concerning this matter, please ca		auony
William K. Budd		727 567-4820 at ()	
Nam	e of Person	Area Code Daytime T	Celephone Number
Enclosed is a check fo	r 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 ADDRESS:

TO:

Registration Section

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

RJ HOF 34-PARDEE UNIT 24 L		
. (Name of the Lin	ited Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited	Liability Company were filed on $\frac{12/017}{1}$	2014 and assigned
Florida document number L14000183506	·	•
his amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company here:	
N/A		
The new name must be distinguishable and contain the	words "Limited Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	三 三 三 5
Principal office address MUST BE A STRE	ET ADDRESS)	- File E
	·	AC TO
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	E BOX)	S
		Sin or
B. If amending the registered agent and egistered agent and/or the new registered. Name of New Registered Agent: New Registered Office Address:	d/or registered office address on ou office address here:	r records, enter the name of th
	Enter Florida s	treet 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

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>	Name	Address	Type of Action
MGR	Raymond James Tax Credit Fund XX L.L.C.	880 Carillon Parkway	□ Add
		Dept. 05485	■ Remove
		Saint Petersburg, FL 33716	☐ Change
MGR	Raymond James Housing Opportunities Fund 34 L.P.	880 Carillon Parkway	Add
		Dept. 05485	
		Saint Petersburg, FL 33716	□ Remove
			Change
		-	Add
			□ Remove
			□ Change
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F Effectiv	ve date, if other thai	the date of filir	ng:		(antia	nal\
(II an elle Note:	ective date is listed, the dat If the date inserted in the ent's effective date on the	e must be specific ar is block does not	nd cannot be prior to meet the applical	o date of filing or mor	e than 90 days after f	iling.) Pursuant to 60
If the rec (b) The	ord specifies a del 90th day after the	ayed effective record is filed	date, but not	an effective tir	me, at 12:01 a	.m. on the earl
	June 10		2015			三 三 三 5 5
Dated_			.,	_•		
			$\backslash \Lambda$			ASSEE, F
		Signature of a	member or author	ized representative o	t'a member	

Page 3 of 3

Filing Fee: \$25.00