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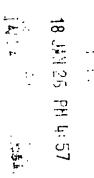
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

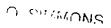
Office Use Only



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COVER LETTER

TO:		gistration Sec ision of Corp			
crm	meer.	RJTCF 42-R	JHOF 44 PARK PASEO L.L.	C.	
SUB	JECT:		Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The	enclosed	i Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Pleas	se return	all correspon	dence concerning this matter	to the following:	
			William K. Budd		
				Name of Person	
			Raymond James Tax Credi	t Funds, Inc.	
				Firm/Company	
			880 Carillon Parkway		
				Address	
			St. Petersburg, FL 33716		
				City/State and Zip Code	
			bill.budd@raymondjames.co		
			E-mail address: (1	to be used for future annual report	notification)
For f	iirther in	nformation co	ncerning this matter, please ca	ill:	
Willi	iam K. I	Budd		727 567-4820 at ())
		Name of	Person	Area Code Day	rtime Telephone Number
Enclo	osed is a	check for the	following amount:		
■ \$	25.00 F	iling 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:

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

RJTCF 42-RJHOF 44 PARK PASE(L.L.C.		
(Name of the Limite	d Liability Comp A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liz Florida document number L17000104802	ability Company	y were filed on May 11, 2017	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited lial	oility company here:	
RJTCF 42-RJCHOF VI Park Paseo L.L.C.			
The new name must be distinguishable and contain the wo	ords "Limited Liab	ility Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	N/A	
(Principal office address MUST BE A STREET	(ADDRESS)		
			P. C.
			20
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE E	BOX)		
			<u> </u>
			ेद्धा चें
B. If amending the registered agent and/or registered agent and/or the new registered off			enter the name of the new
Name of New Registered Agent:	N/A		
New Registered Office Address:		Enter Florida street address	
		Time 1 to the fire out great con	
		, Flor	ida 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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
	N/A		Add
			Remove
			☐ Change
			
			Remove
			Change Add Remove
			Add 25
			Remove
			☐ Change
			
			□ Remove
			□ Change
			Change

_□ Remove

_____ Change

N/A	
	<u> </u>

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estive data if other than the date of filings	(optional)
ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior	or to date of filing or more than 90 days after filing.) Pursuant to 605.03
te: If the date inserted in this block does not meet the appli ument's effective date on the Department of State's records	cable statutory filing requirements, this date will not be listed
record specifies a delayed effective date, but n	ot an effective time, at 12:01 a.m. on the earlier
he 90th day after the record is filed.	
December 14 , 2017	·
^	№ /

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Typed or printed name of signee

Filing Fee: \$25.00