## 118000015788

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
· (B	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



600315033156

06/29/18--01013--025 •••60.00

FILED 8 3:58

K SALY
JUL - 3 2918

## **COVER LETTER**

RJ H	OF 42-Civita II 4% L.L.C.		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Article	es of Amendment and fee(s) are sub	mitted for filing.	
Please return all cor	respondence concerning this matter	to the following:	
	William K. Budd		
		Name of Person	
	Raymond James Tax Ci	redit Funds, Inc.	
		Firm/Company	
	880 Carillon Parkway		
		Address	
•	St. Petersburg, FL 3371	6	
	<del></del>	City/State and Zip Code	
	bill.budd@raymondjames		
	E-mail address; (	to be used for future annual report notifi	cation)
For further informat	ion concerning this matter, please c	all:	
William K. Budd		727 567-4820	
N	ame of Person	at ()	Telephone Number
Enclosed is a check	for the following amount:		
□ \$25.00 Filing Fe	ce \$30.00 Filing Fcc & 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)
M	All INC ADDRESS.	STDEET/CAUDIE	ED ANNDESS.

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

FILED

18 JUN 29 PH 3:59

RJ HOF 42-Civita II 4% 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 L	iability Compa	ny were filed on January 18, 2018	and assigned
Florida document number L18000015788	·		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited li	ability company here:	
RJ HOF 57-Civita II 4% L.L.C.			
The new name must be distinguishable and contain the	words "Limited Lia	ability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if application	able:	N/A	
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	BOX)		
		· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and registered agent and/or the new registered of			r the name of the nev
Name of New Registered Agent:	N/A		
New Registered Office Address:			
		Enter Florida street address	
		, Florida	
		City	Zip Code
New Registered Agent's Signature if changing	Danistarad Agar	<b></b>	

## 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
		St. Petersburg, FL 33716	Remove
			Change
MGR	Raymond James Housing Opportunities Fund 57 L.P.	880 Carillon Parkway	
		St. Petersburg, FL 33716	□ Remove
			☐ Change
· 	<del></del>	<del></del>	☐ Adđ
·		<del></del>	Remove Change
			29 Add
			ب ن پ پ پ پ پ پ
		<del></del>	Change
		<del></del>	
		<del></del>	Remove
			Change
<del></del>			
			☐ Remove
			□ Change

N/A			<del></del>
			<del></del>
		• .	
	<del></del>	<u></u>	
			<u> </u>
		•	
			29
			79. 7
		·	
			5 0
	<del></del>		م برد
•			
•			
-			
	<u> </u>		
		<del></del> -	<del> </del>
Tective date, if other than the	date of filing:		(optional)
an effective date is listed, the date mus	t be specific and cannot be prior to		0 days after filing.) Pursuant to 605.020
ote: If the date inserted in this blocument's effective date on the D		e statutory filing require	ments, this date will not be listed as
	partition of place 5 records.		
: record specifies a delayed The 90th day after the rec		in effective time, at	12:01 a.m. on the earlier o
The 30th day after the rec	no is ineu.		
June 13	2018		
ated			
	$\sim$ $\Lambda$		
			,
	Signature of a member or authorize	ed representative of a mem	ber

Page 3 of 3

Filing Fee: \$25.00