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COVER LETTER

TO: Registration S Division of Co			
RJHOF 58	R-RJTCF 43 Woodlands Albany	L.L.C.	
30 0 0000000000000000000000000000000000	Name of Lin	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	William K. Budd		
		Name of Person	
	Raymond James Tax Cred	it Funds, Inc.	
		Firm/Company	
•	880 Carillon Parkway		
		Address	
	St. Petersburg, FL 33716		
	bill.budd@raymondjames.c	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information	concerning this matter, please c	all:	
William K. Budd		727 567-4820 at ()	
Name	of Person		Telephone Number
Enclosed is a check for t	the following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fec & 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

ARTACLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RJHOF 58-RJTCF 43 Woodlands Albany 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 May 9, 2018 and assigned Florida document number L18000116384 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RJHOF 58-RJTCF 45 Woodlands Albany L.L.C. The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the r registered agent and/or the new registered office address here: N/A Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida __

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 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 i 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.

 Cin°

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 = A	MBR = Authorized Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action			
			□ Remove			
			□ Change			
			□ Add			
		10 10 1	□ Remove			
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Effective da	te, if other than the late is listed, the date mus	date of filing	g:			(0	ptional)	
Note: If the	late is listed, the date mus date inserted in this blo iffective date on the Do	ock does not m	neet the appli	icable statu	filing or more tory filing re	than 90 days equirements,	after filing.) Purs this date will i	uant to 605.0207 (3) not be listed as the
the record s) The 90th	pecifies a delayed day after the reco	effective d ord is filed.	late, but n	ot an eff	ective tim	e, at 12:0	11 a.m. on t	he earlier of:
June 2 Dated	6		2019					
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_		Signature of a r	nember or eutl	horized repr	esentative of	nember :		
	even J. Kropf, the Preside anager of RJHOF 58-RJT		\ \	_ 1				

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00