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(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

	ation Section n of Corporations	
	AHF 11-Arrowleaf Townhomes L.L.C.	
SUBJECT:	Name of Limited Liability Company	
	ticles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following:	
	William K. Budd	
	Name of Person	
	Raymond James Tax Credit Funds, Inc.	
	Firm/Company	25:19
	880 Carillon Parkway	15.13 JE11 22
	Address ',	22
	St. Petersburg, FL 33716	22 72 15
	City/State and Zip Code	ي عند :
	bill.budd@raymondjames.com	ذ رح
For further inform	E-mail address: (to be used for future annual report notification) mation concerning this matter, please call:	
William K. Budd		
	Name of Person	<u>-</u>
Enclosed is a chec	eck for the following amount:	
□ \$25.00 Filing	g Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Certificate of Status Certified Copy Certificate of Certified Copy (additional copy is enclosed) Certified Co (additional copy is enclosed)	of Status &

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

RJAHF 11-Arrowleaf Townhomes L.L.C.			
(<u>Name of the Limited Liab</u> (A Flori	lity Company as it now appears or da Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability	Company were filed on Decen	nber 3, 2018	and assigned
Florida document number L18000278124	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability company here:		
N/A			
The new name must be distinguishable and contain the words "Li	mited Liability Company," the desig	nation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A		~?
Principal office address MUST BE A STREET ADD	ORESS)		THE
		7.	The second
			12 m
Enter new mailing address, if applicable:	N/A		でに
Mailing address MAY BE A POST OFFICE BOX)			
	<u>-</u>		.2
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad Name of New Registered Agent: N/A		ır records, <u>enter</u>	the name of the
New Registered Office Address:	Enter Florida .	street 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	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 Affordable Housing Fund 11 L.L.C.	880 Carillon Parkway	
		St. Petersburg, FL 33716	□ Remove
			Change.
			☐ Add ☐ Remove
			☐ Change
			Add
			☐ Remove
			□ Change
			□ Remove
			Change
			Add
			□ Remove
			Change

N/A		on, enter change(s) here:		
				
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f an effect Note: If	e date, if other than the dive date is listed, the date must be the date inserted in this bloct's effective date on the Dep	e specific and cannot be prior to c k does not meet the applicable	late of filing or more than 90 day	(optional) ys after filing.) Pursuant to 605.0207 ts, this date will not be listed as
	rd specifies a delayed of Oth day after the recor		n effective time, at 12	:01 a.m. on the earlier of
Dated	ecember 31	2018		
		W		
		gnature of a nember or authoriz	ed representative of a mumber	

Typed or printed name of signee

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