## L230003727SS

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## **COVER LETTER**

Divi	ision of Corpo	rations				
, SUBJECT:	RJ MT Silver	Gardens Residence L.L.C.				
SUBJECT.		Name of Limi	ted Liability Company			
The enclosed	Articles of An	nendment and fee(s) are subt	mitted for filing.			
Please return	all correspond	ence concerning this matter	to the following:			
		Justin Mayor				
			Name of Person			
Raymond James Affordable Housing Investments, Inc.						
Firm/Company						
	880 Carillon Parkway					
	Address St. Petersburg, FL 33716					
City/State and Zip Code						
		justin.mayor@raymondjame			~	
		E-mail address: (t	to be used for future annual report notifi	cation)	2024 HAR SECKET	
For further in	formation con	cerning this matter, please ca	all:		开启 开品	
Justin Mayor	г		727 567-3162 at ()		受 25	-
	Name of P	erson		Telephone Number	## 11: 3	
Enclosed is a	check for the	following amount:			주된 3	
□ \$25.00 F	iling Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	

Mailing Address:

TO:

**Registration Section** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RJ MT Silver Gardens Residence 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 August 8, 2023 and assigned Florida document number L23000372755 This amendment is submitted to amend the following: 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 designation "LLC" or the abbreviation 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 new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

\_, Florida \_

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>	<u>Name</u>	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 33 L.L.C.	880 Carillon Parkway	<b>=</b> Add
		St. Petersburg, FL 33716	□Remove
			□Change
<del></del>			
			□Remove
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ffective date,	if other than the da	te of filing:			_ (optional)	
an effective date:	is listed, the date must be	specific and cannot be	prior to date of fili	ng or more than 90 d	ays after filing.) Pursuan	it to 605.0207
	e inserted in this block tive date on the Depa			y ming requireme	nts, this date will not	be listed as
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l is filed.	a delayed effective da	ne, our not an enecu	ve time, at 12.01	a.m. on the earn	ii oi. (b) The 90th di	ay after the
March I		2024				
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