

A02000000 453

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

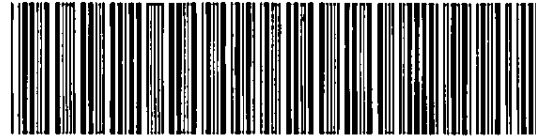
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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03/13/18--01019--002 \*\*52.50

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 MAR 13 PM 12:04

B FIGUEROA

MAR 15 2018


March 8, 2018

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

Re: Finlay Interests 2, Ltd.  
Finlay Interests MT 2, Ltd.

Enclosed for filing are an original and one copy of the Certificate of Dissolution for each of the above limited partnership as well as two checks in the amount of \$52.50 each for payment of the filing fee. Please file the originals and return file-stamped copies in the enclosed self-addressed postage paid envelopes. If there are any questions or additional information is required, please feel free to contact me at (303) 691-4382. Thank you for your assistance.

Sincerely,



Lucinda M. Ehrhard  
Assistant Secretary

/lme  
Enclosure

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FINLAY INTERESTS MT 2, LTD.  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Lucinda M. Ehrhard  
(Contact Person)

Aimco  
(Firm/Company)

4582 S Ulster St. Suite 1100  
(Address)

Denver, CO 80237  
(City, State and Zip Code)

For further information concerning this matter, please call:

Lucinda M. Ehrhard at ( 303 ) 691-4382  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |  |   |
|--|---|--|---|
| <input checked="" type="checkbox"/> \$52.50 Filing Fee | <input type="checkbox"/> \$61.25 Filing Fee<br>and Certificate of<br>Status | <input type="checkbox"/> \$105.00 Filing Fee<br>and Certified Copy | <input type="checkbox"/> \$113.75 Filing Fee,<br>Certified Copy, and<br>Certificate of Status |
|--|---|--|---|

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**CERTIFICATE OF DISSOLUTION  
FOR**

FINLAY INTERESTS MT 2, LTD.

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 03/27/2002, assigned Florida document number A02000000453, hereby submits this Certificate of Dissolution.

**FIRST:** Reason for dissolution: (State why partnership is submitting dissolution)

The events for dissolution that are specified in the partnership agreement  
have occurred.

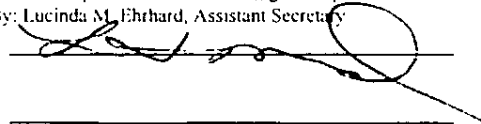
**SECOND:** ☐ A Notice of Dissolution is attached.  
(Check box if attached.)

**THIRD:** Effective date, if other than the date of filing: \_\_\_\_\_

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

Signatures of each general partner or the person appointed pursuant to

s. 620.1803(3) or (4), F.S.:  
AIMCO Capital Tax Credit I, Inc., general partner  
By: Lucinda M. Ehrhard, Assistant Secretary

  
\_\_\_\_\_  
\_\_\_\_\_

Filing Fee:	\$52.50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 MAR 13 PM 12:01