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(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

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G. MCLEOD

MAY - 3 2011

EXAMINER



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SECRETARY OF STATE
ALL AHASSE FOR STATE

COVER LETTER

TO:	Registration S Division of C					
SUBJI		ed Mortgage Co Florida Limited Partnershi				ted Partnership)
The en	closed Certific	cate of Dissolution and	d fee(s)	are sub	mitted f	for filing.
Please	return all corre	espondence concerning	ng this r	natter to	:	
Leonard	d Vandermast	<i>III</i> _				
		(Contact Person)				
Affiliate	d Mortgage Co	nsultants, LLLP				
		(Firm/Company)				
6544 U	S Hwy 41 N					
		(Address)				
Anollo I	Beach, FL 3357	72				
Apollo		City, State and Zip Code)				
	``	,,				
For fur	ther information	on concerning this ma	itter, pl	ease call	:	
Leonard Vandermast			at (813) 645	-4588
	(Name of Conta	ct Person)		(Area Coo	de and Da	aytime Telephone Number)
Enclos	ed is a check f	or the following amou	unt:			
□ \$52.5	0 Filing Fee	☑ \$61.25 Filing Fee and Certificate of Status)5.00 Filin ertified Co		☐ \$113.75 Filing Fee, Certified Copy, and 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

Affiliated Mortgage Consultants, LLLP (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 8-1-2005, assigned Florida document number W05000033846, hereby submits this Certificate of Dissolution.	
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)	
No longer conducting business effective 12/31/2010. License expired	
>> 	
HAS	APR 2
SECOND: A Notice of Dissolution is attached. (Check box if attached.)	2 PM 2
THIRD: Effective date, if other than the date of filing:	305
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Flo Department of State.)	rida
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:	
Leanard Vardemont III	
·	
Filing Fee: \$52.50 Contified Conv. (entional): \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	

NOTICE OF DISSOLUTION FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

This "Notice of Dissolution" is optional and is not required when filing a Certificate of Dissolution. Name of Dissolved Limited Partnership or Limited Liability Limited Partnership: Affiliated Mortgage Consultants, LLLP Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.) Leonard Vandermast III C/O United Mortgage Affilaites, Inc. 6544 US Hwy 41 N Apollo Beach, FI 33572 A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice. Signature of a general partner or a principal of the successor entity: Leaner Vanda leonard vandermast III Printed Name

Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.