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City/State/Zip Phone #		Office Use Only	
CORPORATION 1	NAME(S) & DOCUME	ENT NUMBER(S), (if known):	
1			
(Corpo	oration Name)	(Document #)	
2(Corporation Name)		(Document #)	
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NEW FILINGS	AMENDMENTS	s 700002827087	
Profit	Amendment	****185.08 ****	
NonProfit	Resignation of R.A.,	Officer/ Director	
Limited Liability	Change of Registered	l Agent	
Domestication	Dissolution/Withdrav	wal (15)	
	Merger		
Other			
OTHER FILINGS	REGISTRAT	A CANADA	
OTHER FILINGS Annual Report	QUALIFICA'	A CANADA	
OTHER FILINGS Annual Report Fictitious Name	Foreign	A CANADA	
OTHER FILINGS Annual Report	QUALIFICA'	A CANADA	
OTHER FILINGS. Annual Report Fictitious Name	Foreign Limited Partnership	A CANADA	



FLORIDA DEPARTMENT OF STATE

SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FLORIDA LIMITED PARTNERSHIP

Secretary of State

The undersigned general partners of	Allied Home Mortgage, Ltd.	
	, a	
Florida Limited Partnership, executed t Florida Statutes.	this supplemental affidavit filed pursuant to section 620.112,	
The total amount of the capital contribut	tions of the limited partners is: \$25,000.00 .	
This 29 day of March	, 19 <u>99</u> .	
	f. I have read the foregoing and that the facts are true, to the	
best of my knowledge and belief.		
	General Partner(s)	
HOME MORTG	GAGE MANAGEMENT, L.C.	
12	1/2	
Michael	1 Kaplan	
nrenaci	r kapran	
F	Fees:	
\$7 per \$10	00, based on additional	
	contributions	

INHS20(5/95)

Minimum \$ 52.50 Maximum \$1750.00