DOCUMENT # A9900002065  1. Entity Name  MORTGAGE C3, LTD.			ق	SECRETARY OF STATE DIVISION OF CORPORATIONS  OD MAY - L. D	
Principal Place of Business  222 Lakeview Avenue 17 <sup>th</sup> Floor West Palm Beach, FL 33401  Mailing Address 222 Lakeview Avenue 17 <sup>th</sup> Floor West Palm Beach,			401 :	OD MAY - 1 PH 12: 06	fr
Principal Place of Business     Address     Mailing Address		-			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State	City & State			4. FEI Number 65-0981674	Applied For Not Applicable
Zip Country	Zip	Country	/		3.75 Additional
6. Name and Address of Current	Registered Agent		Name	7. Name and Address of New Registered Age	
Regserv Corp.  222 Lakeview Avenue				ess (P.O. Box Number is Not Acceptable)	
17 <sup>th</sup> Floor West Palm Beach	00.101		City	FL	Zip Code
8. The above Regserv Corp.  SIGNATURE: By:  Mark Nussbaum, Vice Present School on record.  9. Capital Contributions as Shown on record.		TE: Registered A	gent signature requi	ered agent, or both, in the State of Florida.  4/27/00  ed when reinstating)  11. MAKE CHECK PAYABLE TO SEE REVERSE SIDE FOR I	
A GENERAL PARTNER T NOTE: General Partners MA	HAT IS A BUSINESS EN Y NOT be changed on t	NTITY MUS	ST BE REGIS	STERED AND ACTIVE WITH THIS OFFICE.  ent must be filed to change a general partner.	er.
12. GENERAL PARTNER INFORMATION DOCUMENT # P99000106978				ADDRESS CHANGES ONLY	
MAME Mortgage C3, Corporation STREET ADDRESS CITY-ST-ZIP West Palm Beach, FL 33401		STREET.	ADORESS		
DOCUMENT # & NAME		STREET	ADDRESS		
STREET ADDRESS CITY-ST-ZIP		CITY-ST	r-ZIP		
DOCUMENT #			ADDRESS .		
STREET ADDRESS COV-ST-ZIP		CITY-ST	I-ZIP	9000032773393 -06/06/0001016002 ****141.25 ****141.25	
DICUMENT #		STREET	ADDRESS	*****141.CO **	P#171.60
STREET ADDRESS CITY-ST-ZIP		CITY-ST	r-ZIP		
DOCUMENT # NAME		STREET	ADDRESS		
STREET ADDRESS CITY-ST-ZIP		CITY-ST	T-ZIP	١,	
DOCUMENT # NAME		STREET	ADDRESS		
STREET ADDRESS CITY-ST-ZIP		CITY-ST	- ZIP		
14. I hereby certify that the information supplied with indicated on this report is true and accurate and the receiver or trustee empowered to execute this	hat my signature shall have	the same le	egal effect as if	Section 119.07(3)(i), Florida Statutes. I further certify made under oath; that I am a General Partner of the	that the information limited partnership or
				(5(1)	655-9008