

B02000000296

CORPORATION(S) NAME

FILED
02 SEP -9 PM 1:11
TALLAHASSEE, FLORIDA

3) Atlantic American Mortgage Fund I, L.P.

RECEIVED
02 SEP -9 PM 3:35
TALLAHASSEE, FLORIDA

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
<input type="checkbox"/> Foreign	<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> Limited Partnership <i>qualification</i>	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Change of RA
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> UCC
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Fictitious Name	<input checked="" type="checkbox"/> CUS
<input type="checkbox"/> Photocopies	<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Will Wait	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In		<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

9/9/02

Order#: 5577615

800007610748--3

-09/10/02--01003--014

Ref#: ***1846.25 ***1846.25

Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

A CCH LEGAL INFORMATION SERVICES COMPANY

FILE THIRD

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

FILED
SEP -9 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. ATLANTIC AMERICAN MORTGAGE FUND I, L.P.

(Name of limited partnership as it is in the home state)

2. N/A

(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")

3. Delaware

(State of Formation)

4. February 4, 2002

(Date of Formation)

5. CT Corporation System

(Name of Registered Agent for Service of Process)

6. 660 E. Jefferson Street

(Street Address of Registered Office)

Tallahassee

(City)

Florida 32301

(Zip Code)

7. Acceptance by the Registered Agent for Service of Process:
CT CORPORATION SYSTEM

By: Connie Bryan

(Agent must sign on this line)

Connie Bryan
Special Asst Secy

8. 1200 - South Pine Island Road

Plantation, FL 33324

(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

Atlantic American Mortgage Partners, LLC

101 E. Kennedy Blvd., Suite 3925
Tampa, FL 33602

M02000002361

10. 101 E. Kennedy Blvd., Suite 3925, Tampa, FL 33602

(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

12. 101 E. Kennedy Blvd., Suite 3925

Tampa, FL 33602

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 6th day of September, 2002

By: Atlantic American Mortgage Partners, LLC
By: Atlantic American Realty, LLC

By: [Signature]
General Partner's Authorized Signatory

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

On this 6th day of September, 2002

Brad A. Gordon, authorized signatory, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____



[Signature]
(Notary Public Signature)
Philip M. Shasteen
(Notary's Printed Name)

My Commission Expires: 5/18/04

02 SEP 19 PM 1:11
FILED
CLERK OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared BRAD A. GORDON, as authorized signatory of Atlantic American Mortgage Partners, LLC,
a general partner of Atlantic American Mortgage Fund I, L.P. (an) Delaware

limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ -0-
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$643,750

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 6th day of September, 2002

By: Atlantic American Mortgage Partners, LLC
By: Atlantic American Realty, LLC

By: *[Signature]*
General Partner

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

On this 6th day of September, 2002

Brad A. Gordon, authorized signatory, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

[Signature]
(Notary Public Signature)

Philip M. Shasteen
(Notary's Printed Name)

Seal

My Commission Expires: 5/18/04

