

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000091518

Entity Name: AMERICAN MORTGAGE COMPANY LLC

FILED
Oct 05, 2006
Secretary of State

Current Principal Place of Business:

4773 58TH AVE N
STE C
ST PETERSBURG, FL 33714

New Principal Place of Business:

Current Mailing Address:

4773 58TH AVE N
STE C
ST PETERSBURG, FL 33714

New Mailing Address:

FEI Number: 05-0627145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIMBRELL, ADAM R
4773 58TH AVE N
STE C
ST PETERSBURG, FL 33714 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ADAM R. KIMBRELL

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FINK, MIKE C
Address: 4773 58TH AVE N STE C
City-St-Zip: ST PETERSBURG, FL 33714

Title: MGR () Delete
Name: PATEL, MITESH R
Address: 4773 58TH AVE N STE C
City-St-Zip: ST PETERSBURG, FL 33714

Title: MGR () Delete
Name: MANSUR, DAX
Address: 4773 58TH AVE N STE C
City-St-Zip: ST PETERSBURG, FL 33714

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FINK, MICHAEL C
Address: 4773 58TH AVE N STE C
City-St-Zip: ST PETERSBURG, FL 33714

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL C. FINK

MGR

10/05/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date