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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution of HomeT.	ime Mortgage, InC.
DOCUMENT NUMBER: P05000110	0864
The enclosed Articles of Dissolution and fee are submitt	ted for filing.
Please return all correspondence concerning this matter to	o the following:
Jerry L. Knie (Name of Contact Person	on)
HomeTime Mortgage, (Firm/Company)	Inc.
P.O. Box 9453 (Address)	<del></del>
Pensacola/Florida 36 (City/State and Zip Co	25/3 ode)
For further information concerning this matter, please ca	11:
Jerry I. Knie at (8.  (Name of Contact Person) (A	50) 218-8162 rea Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$43.75 Filing Fee \$ \$43.75 Fil Certificate of Status Certified C (Additional enclosed)	I copy is Certified Copy
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Home Time Wortgage Inc.
SECOND:	The document number of the corporation (if known): PO 5000 110 864
THIRD:	The date dissolution was authorized: 7/18/67
	Effective date of dissolution if applicable: 8/15/07 (no more than 90 days after dissolution file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
	Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	(voting group)
	ARY ARY
	FLORIDE FLORIDE
	Signature:  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Jerry Leon Knie (Typed or printed name of person signing)
	(Typed or printed name of person signing)  President  (Title of person signing)

Filing Fee: \$35