P93000067869

(Re	equestor's Name)	
(Ad	ldress)	
. (Ad	dress)	· · ·
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FI ORIDA

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations				
SUBJECT: HOMETOWN MORTGAGE LENDING COMPANY				
DOCUMENT NUMBER: P 9 3 0000 67869				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
MARK Asciutto				
(Name of Contact Person)				
HOMETOWN MORTGAGE LENDING COMPANY				
(Firm/Company)				
23494 Westchester Boulevard				
(Address)				
PORT Charlotte, FL 33980				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
MARK ASCIUTTO at (941) 661-2556 (Name of Contact Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$35 Filing Fee \$\to\$				
MAILING ADDRESS: Amendment Section Amendment Section				

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

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	:			
	HOMETOWN MORTGAGE LENDING COMPA					
SECOND:	The document number of the corporation (if known): P 93 0000 67869					
THIRD:	The date dissolution was authorized: 1/1/2007					
	Effective date of dissolution if applicable: ///2007 (no more than 90 days after dissolution	on file date)				
FOURTH:	: Adoption of Dissolution (CHECK ONE)					
	Dissolution was approved by the shareholders. The number of votes case was sufficient for approval.	t for diss	solution			
	☐ Dissolution was approved by of the shareholders through voting groups.					
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled				
	The number of votes cast for dissolution was sufficient for approval by	07 APR -	**************************************			
	(voting group)	-2 PM	· ·			
	Mark Atts Proglet	H I: 17				
	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)					
	MARK ASCIUTTO					
	(Typed or printed name of person signing)					
	PRESIDENT					
(Title of person signing)						

Filing Fee: \$35