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TO:

CR2E079 (2/14)

Registration Section

Division of Corporations PRIME CARS AND TRUCKS LLC **SUBJECT:** (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: SEDAT SENTURK (Contact Person) PRIME CARS AND TRUCKS LLC (Firm/Company) 12234 N.FLORIDA AVE (Address) TAMPA / FL / 33612 (City/State and Zip Code) For further information concerning this matter, please call: SEDAT SENTURK (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: □ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company as it a	appears on the records of the Florida Department
of State is: PRI	ME CARS AND TRUCKS LL	<u>C</u>
2. The Florida docu	_	ened to this limited liability company is:
3. The date this me	mber/manager withdrew/resign	ed or will withdraw/resign is:
4. I, SEDAT SEN	TURK Jame of Person Resigning)	, hereby withdraw/resign as a
MG	(Print Title)	
of this limited lia resignation in wr		imited liability company has been notified of my
Signature of Di	issociating Member or Resignin	g Manager
	\$25.00 (Required) \$30.00 (Optional)	