

40000007179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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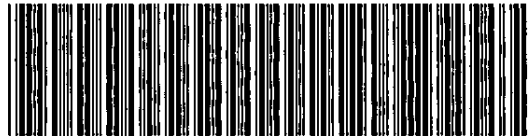
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

OCT 14 2015  
S. YOUNG

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Fleet Financial LLC  
(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:

Alina Chamberlain  
(Contact Person)

Fleet Financial LLC  
(Firm/Company)

6391 49th Street N  
(Address)

Pinellas Park, FL 33781  
(City/State and Zip Code)

For further information concerning this matter, please call:

Alina Chamberlain at ( 727 ) 4925574  
(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:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA



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 appears on the records of the Florida Department of State is: Fleet Financial LLC

2. The Florida document/registration number assigned to this limited liability company is:

L10000007179

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/08/2015

4. I, Svitlana Vaselova, hereby withdraw/resign as a  
(Print Name of Person Resigning)

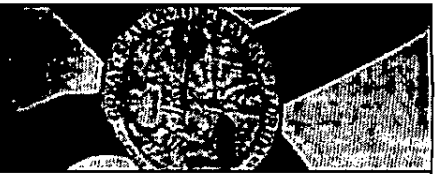
MGRM  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS**Detail by Entity Name****Florida Limited Liability Company**

FLEET FINANCIAL LLC

**Filing Information**

Document Number	L10000007179
FEI/EIN Number	N/A
Date Filed	01/20/2010
Effective Date	01/18/2010
State	FL
Status	ACTIVE
Last Event	LC AMENDMENT
Event Date Filed	04/14/2010
Event Effective Date	NONE

**Principal Address**6391 49TH ST N  
PINELLAS PARK, FL 33781

Changed: 04/29/2011

**Mailing Address**6391 49TH ST N  
PINELLAS PARK, FL 33781

Changed: 04/29/2011

**Registered Agent Name & Address**ATLANTIC FINANCE COMPANY  
6391 49TH ST N  
PINELLAS PARK, FL 33781**Authorized Person(s) Detail****Name & Address**

Title MGRM

VASELOVA, SVITLANA  
10265 Gandy Blvd N  
1414  
St Petersburg, FL 33702FILED  
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TALLAHASSEE, FLORIDA

**Title MGRM**

CHAMBERLAIN, ALINA  
10265 GANDY BLVD N 903  
ST PETERSBURG, FL 33702

**Annual Reports**

<b>Report Year</b>	<b>Filed Date</b>
2013	04/26/2013
2014	04/30/2014
2015	04/30/2015

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