

L11000056672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

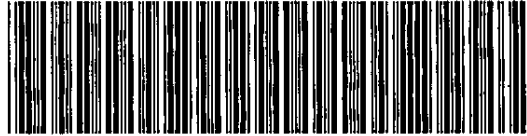
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 OCT 26 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 27 2015

Y SULKER

Naples Realty International, LLC

October 7, 2015

Dennis McLaughlin
Naples Realty International, LLC
877 91st Avenue N. Suite 2
Naples FL 34108

RE: Resignation letter



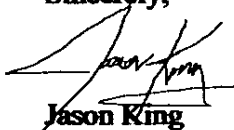
Dear Mr. McLaughlin:

Please accept this letter as my notice of resignation as the Managing Broker of Naples Realty International, LLC effective today October 7, 2015.

Thank you for the opportunities for professional and personal development that you have provided me during my employment. I have enjoyed working for the brokerage and appreciate the support provided me during my tenure with the company.

If I can be of any help during this transition, please let me know.

Sincerely,



Jason King
Managing Broker
Naples Realty International, LLC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Naples Realty International, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dennis J McLaughlin

Name of Person

Naples Realty International, LLC

Firm/Company

877 91st Avenue N. Ste 2

Address

Naples, FL 34108

City/State and Zip Code

dennis@naplesrealtyinternational.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dennis McLaughlin

239

370-1513

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Naples Realty International, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on May 13 2011 and assigned
Florida document number L11000056672.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MRG	Jason King	877 91st Avenue N. Suite 2	<input type="checkbox"/> Add
		Naples, FL 34108	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Dennis J. McLaughlin	877 91st Avenue N. Suite 2	<input checked="" type="checkbox"/> Add
		Naples, FL 34108	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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FILED
15 OCT 26 AM 8:19
CLARK COUNTY
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 OCT 26 AM 8:49
SECRETARY OF STATE
WILLAHASSEE, FLORIDA

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated October 22, 2015

_____, _____.

Dean J. McLeary

Signature of a member or authorized representative of a member

Dennis J. McLaughlin

Typed or printed name of signee