

L11000071162

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

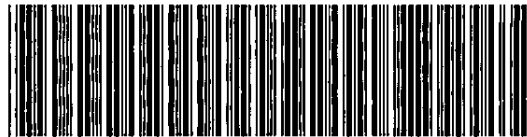
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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JAN 15 2014

CLERK

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ESTATE PLANNERS OF NAPLES, P.L.  
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

AMANDA GOODMAN

(Name of Person)

GOODMAN BREEN & GIBBS

(Firm/Company)

3838 TAMIAMI TRL N STE 300

(Address)

NAPLES, FL 34103

(City/State and Zip Code)

For further information concerning this matter, please call:

AMANDA GOODMAN at 239 403-3000

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

\$55.00 Filing Fee, Certificate of Dissolution &  
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

2014 JAN 13 PM 3:15

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**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is  
ESTATE PLANNERS OF NAPLES, P.L.
2. The Articles of Organization were filed on JUNE 20, 2011 and assigned  
document number L11000071162
3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section  
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).  
BY DECISION OF SOLE MEMBER, KENNETH D. GOODMAN.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed  
above to wind up the company's activities and affairs:

Signature

Printed Name



KENNETH D. GOODMAN

**FILING FEE: \$25.00**

FILED  
JAN 23 2014  
CLERK OF CIRCUIT COURT  
IN AND FOR THE STATE  
OF FLORIDA

2014 JAN 23 PM 3:16

7-1-11