

L17000091954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500306895795

12/22/17--01017--008 **25.00

FILED

17 DEC 22 PM 12:42

ST. LOUIS, MO
FALL 2017

J. LEGGETT
DEC 26 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Naples Prime 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:

Roy Smith

(Contact Person)

Naples Prime Financial, LLC

(Firm/Company)

1010 Fifth Ave S. #301

(Address)

Naples, FL 34102

(City/State and Zip Code)

For further information concerning this matter, please call:

Roy Smith

at (239) 331-1833

(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



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: Naples Prime Financial, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L17000091954

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11-15-17

4. I, JUAN CARLOS REYES, hereby withdraw/resign as a
(Print Name of Person Resigning)

MEMBER

(Print Title)

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

[Signature]
Signature of Dissociating Member or Resigning Manager

FILED
17 DEC 22 PM 12:42
MAIL ROOM

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