## P02000047360

(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



500237835615

07/27/12--01005--024 \*\*35.00



(JUL 27 2012 C. MUSTAIN

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: R.M.G. of Naples	s Inc.
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: F	02000047360
The enclosed Officer/Director R	esignation for a Corporation and fee are submitted for filing
Please return all correspondence	concerning this matter to the following:
Julie Pate	
(Name of	Person)
R.M.G. of Naples d.b.a. Pate	e's
(Name of Firm	n/Company)
1100 Tamiami Tr. N.	
(Addre	ess)
Naples, FL. 34102	
(City/State and	1 Zip Code)
For further information concern	ing this matter, please call:
Julie Pate	at ( 239 ) 263-4581 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 r	nade payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Julie Pate	, hereby resign as Treasurer		
	,y 100.g.1 us_	(Title)	
ofR.M.G. of Naples, Inc.			
, (Nan	ne of Corporation)	· · · · · · · · · · · · · · · · · · ·	
P02000047360	, a corporation organized un	nder the laws of the State of	
(Document Number, if known)			
Florida			
	·		
·		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
·			
_	<b>1</b> ()	The Party	
	Juli Pat		
	(Signature of resigning officer/direct	etor)	
	<i>U</i> .	•	

## FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

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