# P91000108692

| (Requestor's Name)                      |      |      |
|---|------|------|
| (Address)                               |      |      |
| (Address)                               |      |      |
| (City/State/Zip/Phone #)                |      |      |
|   | WAIT | MAIL |
| (Business Entity Name)                  |      |      |
| (Document Number)                       |      |      |
| Certified Copies Certificates of Status |      |      |
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|   |      |      |
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| Office Use Only                         |      |      |
|   |      |      |



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OCT 21 2015

### **TRANSMITTAL LETTER**

TO: Amendment Section Division of Corporations

# SUBJECT: CITIWIDE FINANCIAL SERVICES, INCORPRATED

(Name of Corporation)

# DOCUMENT NUMBER: <u>P97000108692</u>

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

## KRYSTAL KANE REYES

(Name of Person)

### CITIWIDE FINANCIAL SERVICE, INC

(Name of Firm/Company)

## 2656 US 1 SOUTH

(Address)

# SAINT AUGUSTINE, FL 32086

(City/State and Zip Code)

For further information concerning this matter, please call:

# KRYSTAL KANE REYES at 308 660-2501

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

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

### Street Address:

Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

CR2E044 (05/13)



### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 8, 2015

KRYSTAL KANE REYES CITIWIDE FINANCIAL SERVICES 2656 US 1 SOUTH ST. AUGUSTINE, FL 32086

SUBJECT: CITIWIDE FINANCIAL SERVICES, INCORPORATED Ref. Number: P97000108692

We have received your document for CITIWIDE FINANCIAL SERVICES, INCORPORATED, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 915A00021301



www.sunbiz.org

### OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

# I, KRYSTAL KANE REYES, hereby resign as VICE PRESIDENT

### (Title)

# GITIWIDE FINANCIAL SERVICES, INCORPRATED

(Name of Corporation)

### P97000108692

(Document Number, if known), a corporation organized under the laws of the State of

**FLORIDA** 

Knystal Kane Reyes

(Signature of resigning officer/director)

FILED

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