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Division of Corporations

Fax Number : (85

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

DISSOLUTION OR WITHDRAWAL

ROAD RAIDERS TRANSPORTATION, INC.

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TO:	Amendment Section Division of Corporations		
SUBJ	ECT: Road Raiders Transportation, Inc.		
		(Name of Corporation	
DOC	ument number:		
The c	nclosed withdrawal application and	fee are submitted for fil	ing.
		g this	
Division of Corporations SUBJECT: Road Raiders Transportation, Inc. (Name of Corporation) DOCUMENT NUMBER: The enclosed withdrawal application and fee are submitted for filling. Please return all correspondence concerning this matter to the following: Mark Minor			
		(Name of Person)	
	Matson		
		(Firm/Company)	
	555 12th Street, 7th Floor		
		(Address)	
	Oakland, CA 94607		
	(1	City/State and Zip code)	
For fu	rther information concerning this ma	tter, please call:	
Stepha		/	
Enclo	•	(Area Cod	e & Daytime Telephone Number)
□ \$ 3:		Certified Copy (Additional copy is	
	Amendment Section Division of Corporations		Amendment Section Division of Corporations

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

	Road Raiders Transportation, Inc.	
	(Name of Corporation)	
	F13000005323	ند رسط
	(Dacument Number of Corporation (if known)	
	Delaware	عد :
	(Incorporated Under Laws of)	•
	orporation is no longer transacting business or conducting affairs within the State of Florida and he arily surrenders its authority to transact business or conduct affairs in Florida.	€by
ppoint	orporation revokes the authority of its registered agent in Florida to accept service on its behalf its the Department of State as its agent for service of process based on a cause of action arising due it was authorized to transact business or conduct affairs in Florida.	
he fol	flowing is a current mailing address for the corporation:	
	555 12th Street, 7th Floor (Mailing Address)	
	• •	
	Oakland, CA 94607	
	(City/ State /Zip)	
he co	exporation agrees to notify the Department of State in the future of any change in its mailing address	
	7-9-15	
	(Signature of a director, president or other officer - if in the hards of a receiver or other educt appointed fiduciary, by that fiduciary)	-
	Mark Minor	_
	(Typed or printed name of person signing) (Title of person signing)	

FILING FEE \$35