Lo200028383

| (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: |
| |
| |
| |





800102062688

05/10/07--01037--007 **25.00

DIVISION OF CORPORATIONS

COVER LETTER

| TO: Registration Section | |
|--|--|
| Division of Corporations | |
| SUBJECT: 3PL of the America | <u>Ca S</u> Liability Company) |
| | |
| The enclosed member, managing member or ma filing. | nager resignation and fee(s) are submitted for |
| Please return all correspondence concerning this | s matter to: |
| TOHN ERRY (Contact Person) | |
| (Contact Person) | |
| N/A | D D |
| M/A (Firm/Company) | 97 M |
| 29 mil 91 st | |
| 29 NW 96 5 t (Address) | |
| Migny Shores, FL. 33150 | O7 MAY 10 AM 10: 26 |
| (City/State and Zip Code) | |
| For further information concerning this matter, p | blease call: |
| JOHN TERRY at | (786) 525-1544 (Area Code & Daytime Telephone Number) |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| Enclosed please find a check made payable to the | e Florida Department of State for: |
| \$25 Filing Fee | \$55 Filing Fee & Certified Copy |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: |
| Registration Section | Registration Section |
| Division of Corporations | Division of Corporations |
| Clifton Building | P.O. Box 6327 |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 |

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

| 1. The name of the of State is: | limited liability company as i 3PL of He Ame | it appears on the records o | of the Florida | Depart | ment |
|---------------------------------|---|---|-------------------|--------|------------|
| 2. This limited liab | lity company was organized | under the laws of: | | | |
| 3. The Florida docu | ment/registration number of 2000 28383 4N TERRY ame of Person Resigning) | this limited liability comp FEI-5223 | oany is: 82572 | 07 MAY | DIVISION O |
| of this limited lial | oility company and affirm the | | | | |
| resignation in wri | ^ | ember or Manager | | 5 | HS. |
| Filing Fee: | \$25.00 (Required) \$30.00 (Optional) | | | | |