Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: THE TRUCKERS HELPER, U.C.
(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:
Johns Ewing (Contact Person)
THE TOUCK THE HELDER ILL
THE TRUCKERS HELPER LLC (Firm/Company)
5753 Hwy 85 N #3288 (Address)
CRESTVIEW, FL 32536 (City/State and Zip Code)
For further information concerning this matter, please call:
John Ewing at (321) 604-0685
John Ewing at (321) 664 -0685 (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
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

CR2E079 (2/14)



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: The Truckers Herper LLC.
2. The Florida document/registration number assigned to this limited liability company is:
L\$2669032552
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 01/01/2016
4.1. Bruce: Mactin hereby withdraw/resign as a
4.1. Bruce: IVAect 103 (Print Name of Person Resigning) WANAGER (Print Title)
of this limited liability company and aftirm the limited liability company has been notified of my resignation in writing.
55
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)

(71217079 (2/14)