## L0500043875

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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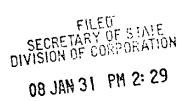
SECRE IAK CORPORATION OR JAN 31 PM 2: 29

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: CC & CD TRUCKING, LL (Name of Limited)	C 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:
FRANCES LOWE	
(Contact Person)	
FRANCES CASEY LOWE, P.A.	
(Firm/Company)	<del></del>
3119-B CRAWFORDVILLE HIGHW	/AY
(Address)	<del></del>
CRAWFORDVILLE, FLORIDA 3232	27
(City/State and Zip Code)	
For further information concerning this matter, p	please call:
FRANCES LOWE	<sub>(</sub> 850 <sub>)</sub> 926-8245
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th	
\$25 Filing Fee	<b>√</b> \$55 Filing Fee & Certified Copy
	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327
Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)





## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as it a		s of the Florida Department
2. This limited liab	oility company was organized un	der the laws of: 	
3. The Florida doc L0500004	ument/registration number of thi	s limited liability con 	mpany is:
4. I,	DWIGHT GROSS  Name of Person Resigning)	_, hereby resign as a	MEMBERS (Print Title)
of this limited lia resignation in wr	bility company and affirm the lir	how	,
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		