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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: B.A.R.R. Logistic 3 (Name of Limited Liability Co	LLC mpany)	
The enclosed member, managing member or manager resigning.	gnation and fee(s) are submitted fo	r
Please return all correspondence concerning this matter to	:	
Roddey Roberts (Contact Person)		•
(Contact Person)	0	DIVISION
0 0 0		DIVISION 19
ROUSULTING GROUP (Firm/Company)		Ď ?
(Pim/Company)	,	9
		PH 2: 45
2875 S. ORANGE AVE, STE 500-1410	_	12
(Address)		=
20.41		S
ORLANDO, FL 32806 (City/State and Zip Code)	_	
(City/State and Zip Code)		
For further information concerning this matter, please call:	:	
·		
Rodden M. Roberts at 321	1 274-3795	
Roddey M. Roberts at (32) (Name of Contact Person) (Area Code	& Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida I	Department of State for:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	
•	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	
Tallahassee, Florida 32301		

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company as it ARR Loc/57/65 L	appears on the records of the Florida De	01 min
	ity company was organized u		PR 19 PM 2: 45
3. The Florida docum	nent/registration number of th	is limited liability company is:	Un To
L0600011	01149	·	
4. I, RODDEY	M COBERTS me of Person Resigning)	, hereby resign as a MANACING (Print Title)	MEMBER
of this limited liabi resignation in writi		imited liability company has been notif	ied of my
Signature of Resignature	ning Member, Managing Mer	nber or Manager	
Filing Fee: Certified Copy:	, - ,		