

LDL0000107338

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

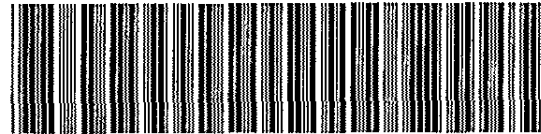
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

LS

Office Use Only



300110020263

9/28/07 D1D18/D15 \$55.00

FILED
2007 SEP 28 PM 1:54
CLERK OF COURT
LAKE COUNTY, OHIO

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MERCON TRANSPORTATION LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fees are submitted for filing.

Please return all correspondence concerning this matter to:

HECTOR L MERCEDES

(Contact Person)

(Firm/Company)

759 EAST 149 THE STREET

(Address)

BRONX, NY. 10455

(City/State and Zip Code)

For further information concerning this matter, please call:

HECTOR L MERCEDES

(Name of Contact Person)

at (718) 401 2305.-

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☒ \$55 Filing Fee

Certified Copy

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 (5/06)



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 limited liability company as it appears on the records of the Florida Department of State is: MERCON TRANSPORTATION LLC

2. This limited liability company was organized under the laws of:
FLORIDA

3. The Florida document/registration number of this limited liability company is:
L06000107338

4. I, HECTOR L MERCEDES, hereby resign as a MGRM
(Print Name of Person Resigning) *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

X [Signature]
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

CR2E079 (5/06)

FILED
2007 SEP 28 PM 1:54
RECEIVED
ALLAHSSEE, FLORIDA