L10000096499

(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: A. LUNT				
NOV 21 2011				
EXAMINER				

Office Use Only



900214355829

ZOIL NOV 18 PH 5: 96

11/18/11--01019--018 **25.00

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Highly Trusted Transport	
(Name of Limited	l Liability Company)
The enclosed member, managing member or managing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning thi	s matter to:
Ziakaree Howard	
(Contact Person)	SECRETAR) ALLAHASSI
Highly Trusted Transport, LLC	HASS
(Firm/Company)	
321Meridian Ridge Ct	
(Address)	
Tallahassee, FL 32312	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Ziakaree Howard	850 ₎ 661-6124
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the state of	he Florida Department of State for: \$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 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 hly Trusted Transport,		of the Florida D	epartm	ent
2. This limited liab	lity company was organized un f Florida (Sec. Of State	nder the laws of:	LAHASSEE	NOV IS	
3. The Florida docu L10000096	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·	73	<u>ಾ</u> ಕ್ರಾ	
_{4. I.} Jujuana Ho	oward	_, hereby resign as a _	√ice Preside	ent	
(Print Name of Person Resigning)			(Print Title)		_
of this limited liab resignation in wri	ility company and affirm the li ting.	mited liability company	/ has been notif	ied of r	ny
	gning Member, Managing Men				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				