## 11000044835

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(Requestor's Name)						
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SECRETARY OF STATE TALL AHASSEE, FADRION

T. CLINE

APR 1 6 2012

**EXAMINER** 

## **COVER LETTER**

	on of Corporations					
SUBJECT:	INTERNATION A (Name of	FLimited Liability Con	DRICE TRAN	ispor-	<sup>ر</sup> ے دد	ے.
The enclosed filing.	member, managing member	er or manager resig	nation and fee(s) are s	ubmitted f	for	
Please return	all correspondence concerr	ning this matter to:				
ALA	N KOIFMAN (Contact Person)	)	-			
	(Firm/Company)		-			
5645 (	CORAL RIDGE (Address)	Dr. 137		SECR	2912	give, be
CORAL	SPRINGS FL (City/State and Zip Code)	33076	-	SECRETARY OF STATE	R I 3 P	
For further in	formation concerning this i	natter, please call:		FLORIE	E T	
ALAN (Na	Me of Contact Person)	at (at Code	)& Daytime Telephone N	Number)	· <b>630</b> /	
Enclosed plea	se find a check made payal \$25 Filing Fee		epartment of State for 55 Filing Fee & Certified Copy	:		
STREET/CO Registration S	URIER ADDRESS:		MAILING ADDRES Registration Section	SS:		
Division of Co			Division of Corporation	ons		
Clifton Buildi	-		P.O. Box 6327			
	ve Center Circle		Tallahassee, Florida 3	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 h	mited liability company a	s it appears on the records of t	he Florida Department
of State is:	UTERNATIONAL	AUTOMOBILE TR	LANSPORT, LLC
2. This limited liabil	ity company was organize	ed under the laws of:	
3. The Florida docur	nent/registration number of	of this limited liability compan	y is:
L110000	44835	·	
(Print Na	me of Person Resigning)	, hereby resign as a <u>∢∨∩</u> h	(Print Title)
resignation in write			## O O O O O O O O O O O O O O O O O O
00 Ma			
Signature of Resig	ning Member, Managing	Member or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		2812 JOR 13 PH & SECRETARY OF STALL AHASSEE, FL