# L11000128447

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#### **COVER LETTER**

TO:

Registration Section **Division of Corporations** 

FDS TRUCKING

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

#### GERARD WILLIAM ROUSSEAU

(Contact Person)

(Firm/Company)

#### 6061 HAMILTON DR

(Address)

#### FORT MYERS FL 34905

(City/State and Zip Code)

For further information concerning this matter, please call:

### GERARD ROUSSEAU at 232 280-6097

(Name of Contact Person)

(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

	limited liability company as it ap S TRUCKING	pears on the records of the F	lorida Department.	
2. This limited liab	ility company was organized undo	er the laws of:	2013 DEC 27 SECRETARI TALLAHASS	
3. The Florida docs L110001284	ument/registration number of this	limited liability company is	<b>PH 5:</b> EEFLOI	
4. I, MICHELLE	ROUSSEAU	, hereby resign as a MGRN	ATEM AND A RIDA	
(Print Name of Person Resigning)		(Print Title)		
of this limited lia resignation in wr	bility company and affirm the lim iting.	ited liability company has b	een notified of my	
Signature of Resi	gning Member, Managing Memb	er or Manager		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			