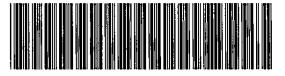
# L12000025385

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Do	cument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



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Lenners OCT 1.4 2013

#### **COVER LETTER**

Registration Section TO: Division of Corporations

SUBJECT: AWX TRANSPORT LLC

(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:

### STEVEN E SHORE

(Contact Person)

## SHORE ASSOCIATES

(Firm/Company)

**PO BOX 385** 

(Address)

#### WEST SIMSBURY, CT 06092

(City/State and Zip Code)

For further information concerning this matter, please call:

STEVEN E SHORE

(Area Code & Daytime Telephone Number)

(Name of Contact Person)

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 X TRANSPORT LLC	it appears on the records o	f the Florida Department
2. This limited liabi	lity company was organized	under the laws of:	
3. The Florida docu L120000253	ment/registration number of	fthis limited liability comp	any is:
4. I, KONSTANT	TIN BUNIN  ame of Person Resigning)	, hereby resign as a	GRM (Managing Member) (Print Title)
	pility company and affirm th		
Signature of Resi	gning Member, Managing M	1ember or Manager	300T 1
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		