L12000027155

Office Use Only



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COVER LETTER

TO: Registration Section
Division of Corporations

STIRTECT: APALACHICOLA TRUCKING, 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:

Donna Duncan

(Contact Person)

Sanders and Duncan, P.A.

(Firm/Company)

P.O. Box 157

(Address)

Apalachicola, FL 32329

(City/State and Zip Code)

For further information concerning this matter, please call:

Donna Duncan

_{at (}850) 653-8976

(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

2. This limited liability company was organized und FLORIDA	der the laws of:			
3. The Florida document/registration number of this L12000027155		五百 25 25 25 25 25 25 25 25 25 25 25 25 25	2973 JUN 24	
_{4. I.} Sammie D. Crum	_, hereby resign as a MGR	M = 100 m = 10	70	1
(Print Name of Person Resigning)		(Print Title)	-	
of this limited liability company and affirm the linguistic resignation in writing. Lammie D. Crum		oeen notifie	d ⊙ ∫ r	my
Signature of Resigning Member, Managing Mem	ber or Manager			
Filing Fee: \$25.00 (Required)				

Certified Copy:

\$30.00 (Optional)