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(Re	questor's Name)	
(Ad	dress)	-
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nai	me)
(Do	cument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

TITO

11/30/15--01026--022 **25.00

DEC 0 7 SOUTE

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: FALLON TRANSPORT L	.LC		
(Name of	Limited Liability Co	ompany)	
The enclosed member, resignation or diss	sociation and fee	(s) are submitted for	or filing.
Please return all correspondence concerni	ing this matter to	:	
MATTHEW FALLON			
(Contact Person)		_	
FALLON TRANSPORT LLC			
(Firm/Company)			
11900 FOREST MERE DR APT 102			
(Address)	·	_	
BONITA SPRINGS FL 34135			2015 9E.C. FAL'L./
(City/State and Zip Code)			VH. TO NOW
For further information concerning this m	natter, please call	:	30 NRY 08 SSEE.
MATTHEW FALLON SR	239 . at (281-2083	TERRE STA
(Name of Contact Person)		le & Daytime Telepl	
Enclosed please find a check made payab ■ \$25 Filing Fee		Department of Sta	
STREET/COURIER ADDRESS:		MAILING AD	
Registration Section		Registration Sec	
Division of Corporations Clifton Building		Division of Corp P.O. Box 6327	oorations

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	he limited liability company as	it appears on the records of the	Florida	Depart	tment
2. The Florida do	ocument/registration number ass 985	signed to this limited liability o	ompany	is:	
3. The date this r	member/manager withdrew/resig	gned or will withdraw/resign is	12/31	/2015	
4. I, PETER FA	ALLON JR	haraby withdraw/ragion o		29	
(Prin	ALLON JR t Name of Person Resigning)	, nereby withdraw/resign a	e de la constant de	2815 NOV	- Ta
AMBR			AS	QV :	
	(Print Title)			30 F	m
	liability company and affirm the	e limited liability company has	been no	U tifjed o	fmy
resignation in v	writing.		37	=	
Petu	Millon			ω	
Signature of	Dissociating Member or Resign	ning Manager			
Filing Fee:	\$25.00 (Required)				

Certified Copy:

\$30.00 (Optional)