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(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Re	equestor's Name)				
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status						
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(Document Number)  Certified Copies Certificates of Status	PICK-UP	☐ WAIT	MAIL			
Certified Copies Certificates of Status	(Business Entity Name)					
	(Document Number)					
Special Instructions to Filing Officer:	Certified Copies	_ Certificates	of Status			
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SECRETARY OF STATE
TALLAHASSEE, FINALE

T. LEMIEUX

## **COVER LETTER**

Registration Section

TO:

CR2E079 (2/14)

**Division of Corporations** M J Express Trucking Services LLC SUBJECT: (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Diane Delgado (Contact Person) M J Express Trucking Services LLC (Firm/Company) 2312 Clark Street, Ste B-1 (Address) Apopka, Florida 32703 (City/State and Zip Code) For further information concerning this matter, please call: Diane Delgado (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: \$55 Filing Fee & Certified Copy □ \$25 Filing Fee **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 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)

		it appears on the records of the Florida l	Department	
of State is:	Express Trucking Service		·	•
2. The Florida docu L1200011894		signed to this limited liability company	is:	
3. The date this me	mber/manager withdrew/resi	gned or will withdraw/resign is:	4	
4. I, Angel L. Mon	tanez	, hereby withdraw/resign as a		
(Print N	ume of Person Resigning)			
Member (MBF	₹)			
(	Print Title)			
of this limited liab resignation in wri		e limited liability company has been noti	ified of my	
Signature of Dis	ssociating Member or Resign	ning Manager	SECRETZ TALLAHA!	AFI F
	\$25.00 (Required) \$30.00 (Optional)		NRY OF STATE SSEE, FLORID	ANOVEL .