Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EAGLE TAX REPRESENTATION, CORP.

Account Number: 12007000037

: (954)752-4553

Fax Number

: (954)752-4522

**Enter the email address for this business entity to be used for future unannual report mailings. Enter only one email address please. ** Zamail Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GLOBAL LOGISTIC GROUP, LLC

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AUG 1 3 2013

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COVER LETTER

Registration Section Division of Corporations

GLOBAL LOGISTIC GROUP, 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:

Angelo Vassallo

Eagle Tax Representation, Corp.

4641 N State Rd 7 - Ste 18

Coconut Creek, FL - 33073

(City/State and Zip Code)

For further information concerning this matter, please call:

Paulo Oliveira, EA

(Name of Contact Person)

Enclosed picase find a check made payable to the Florida Department of State for:

\$25 Filing Fcc

□ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



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SECRETARY OF STATE
FALLAHASSEE, FLORIDA,

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 DBAL LOGISTIC GROU		he Florida Department
2. This limited liab FLORIDA	ility company was organized t	under the laws of:	
3. The Florida docu L130000773	ment/registration number of t	his limited liability compar	y is:
4. I. Eleen Bruno		, hereby resign as a Ma	ınager
(Print Name of Person Resigning)			(Print Title)
of this limited lial resignation in wr	oility company and affirm the iting.		as been notified of my
`	gning Member, Managing Mo	ember or Manager	
_	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		