# L13000085623

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE ON VISION OF CORPORATION SHOW

1/12/15



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 24, 2014

JUAN C. LAVERDE / UNION TRANSPORTATION LLC 1920 BENTLEY BLVD. KISSIMMEE, FL 34741 US

SUBJECT: UNION TRANSPORTATION LLC

Ref. Number: L13000085623

We have received your document for UNION TRANSPORTATION LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 414A00027189

Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org

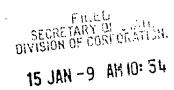
#### **COVER LETTER**

TO: Registration Section Division of Corporations
•
SUBJECT: Union TRANSPORTATION 1/c (Name of Limited Liability Company)
(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:
JUAN C LAVERDE (Contact Person)
(Firm/Company)
1920 BENTLEY Blud (Address)
61551MV100- Fh - 34741 (City/State and Zip Code)
For further information concerning this matter, please call:
TUPN C 1 SVERDE at (407) 791 2042  (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\sim\$ \$\\$25\$ Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations  MAILING ADDRESS: Registration Section Division of Corporations
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314

CR2E079 (2/14)

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)

1. The name of the li	mited liability company as it appears on the records of the Florida Department
of State is:	MOM TRAMSGORTSTION TIC
2. The Florida docum	nent/registration number assigned to this limited liability company is:
L1300	2085623
3. The date this mem	ber/manager withdrew/resigned or will withdraw/resign is: 10/16/2014
4.1. DAMIEL	chidspos , hereby withdraw/resign as a me of Person Resigning)
VICE - 72	
of this limited liabi resignation in writi	lity company and affirm the limited liability company has been notified of my ng.
1	
Signature of Diss	ociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)