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## **COVER LETTER**

TO:

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Registration Section

Division of Corporations Core One Logistics 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: Etan Raz (Contact Person) Core One Logistics LLC (Firm/Company) 2665 S Park Lane (Address) Pembroke Park, FL 33009 (City/State and Zip Code) For further information concerning this matter, please call: Etan Raz (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)

1. The name of the limited liability companions Core One Logistics LLC of State is:			
	ument/registration number a	assigned to this limited lia	ability company is:
3. The date this me	ember/manager withdrew/re	signed or will withdraw/r	06/2 <b>4/2</b> 019
		hereby withdraw/	resign as a
MGR	lame of Person Resigning)		
of this limited lia resignation in wr			any has been notified of my
Signature of D	issociating Member or Resi	gning Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		