

L140000093870

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

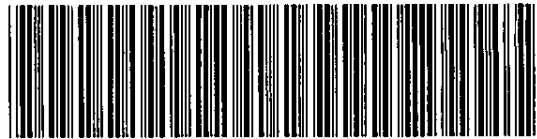
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400290350744

09/30/16--01030--028 **85.00

FILED
16 SEP 30 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

OCT 03 2016



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 company as it appears on the records of the Florida Department of State is: T-MANS TRUCKING LLC.

2. The Florida document/registration number assigned to this limited liability company is:

L 14000093870.

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/18/16

4. I, CASEY L. Hadden, hereby withdraw/resign as a
(Print Name of Person Resigning)

Member AR.
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

X Casey L. Hadden
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
16 SEP 30 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA