

L14000135568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

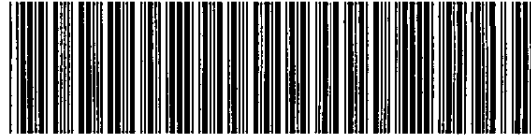
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500278949195

11/23/15--01012--012 **25.00

FILED
2015 NOV 23 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Outigan 11/24/2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SEVEN TRUCKING, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L14000135568

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donna Bertucci
Name of Person

Corporate Direct, Inc
Name of Firm/Company

2248 Meridian Blvd. Suite H
Address

Minden, NV 89423
City/State and Zip Code

ross2820@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jose Garcia at (407) 415-5523
Name of Person Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Gerri Detweiler, hereby resigns as
Name of Registered Agent

Registered Agent for SEVEN TRUCKING, LLC
Name of Limited Liability Company

L14000135568
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Gerri Detweiler
Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

**Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

FILED
2015 NOV 23 PM 3:53
DIVISION OF STATE
TALLAHASSEE, FLORIDA