## 114000/36955

(Requ	uestor's Name)		
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
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(Document Number)			
Certified Copies	Certificate:	s of Status	
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SECRETARY OF STATE
TALLASASSEE, FLORIDA

MAR 24 2015 T. CARTER

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Villa Transport	LLC mited Liability Company)
The enclosed member, resignation or dissoc	ciation and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to:
Yauly Hassers (Contact Person)	<del></del>
(Firm/Company)	
11795 SW 18 St Ap	H-2
Wiani Fl 33175 (City/State and Zip Code)	
For further information concerning this ma	tter, please call:
Yauly Hasseson) (Name of Contact Person)	at (813) 407-6207 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable   ■ \$25 Filing Fee	to the Florida Department of State for:  \$\square\$ \$\square\$ \$\square\$ \$\square\$ Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301

TO:



FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

15 MAR 19 PM 12: 37

## 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	imited liability company as it ap	ppears on the records of the Florida Department
of State is: Vil	la Transport	LLC
2. The Florida docur	ment/registration number assign	ed to this limited liability company is:
L14000	136965	-·
3. The date this men	nber/manager withdrew/resigne	d or will withdraw/resign is: 03 09 2015
4. I. Haday L	opez Lomonta me of Person Resigning)	_, hereby withdraw/resign as a
AHBT	Print Title)	
of this limited liab resignation in writ		nited liability company has been notified of my
Make	<u>^</u> /	
Signature of Dis	sociating Member or Resigning	Manager
_	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	