# LIHOOHII33

Ariel Giglio (Requestors Nan	20)		
5481 Wiles Rd S	•		
(Address)			
(Address)  Coconut Creek F (City/State/Zip/Ph	<u>L 33</u> 073		
PICK-UP WAIT	MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies Certification	ates of Status		
Special Instructions to Filing Officer:			
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> D. BRUCE DEC 19 2016



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 6, 2016

ARIEL GIGLIO 5481 WILES RD SUITE 505 COCONUT CREEK, FL 33073 US

SUBJECT: BANTU LOGISTICS LLC

Ref. Number: L14000149933

We have received your document for BANTU LOGISTICS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 416A0@2591

BEC 16 P IZ: 44

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Deborah Bruce Regulatory Specialist II

Letter Number: 416AQQ025916

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#### 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	e limited liability company as	it appears on the records of th	e Florida Department
of State is: BA	NTU LOGISTICS LLC		2016 SEC
2. The Florida doc L140001499	cument/registration number ass	signed to this limited liability 	AHAMSEE, F
3. The date this me	ember/manager withdrew/resig	gned or will withdraw/resign, hereby withdraw/resign	18 18 18 16 U
	Name of Person Resigning)		
AMBR			
	(Print Title)		
of this limited lia resignation in w	ability company and affirm the riting.	e limited liability company ha	s been notified of my
Signature of D	issociating Member or Resign	ning Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		