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SECRETARY OF STATE TALLAHASSEE, FLORIDA

MAR 31 2015T. CARTER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: AAM MULTI - TRUCK LLC			
(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:			
ABDUL A. MORENO			
(Contact Person)			
AAM MULTI TRUCK LLC			
(Firm/Company)			
316 E PINE ST			
(Address)			
ORLANDO, FLORIDA 32801			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
ABDUL A MORENO 386 383 9056			
(Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida Department of State for: \$\Bigsim \mathbb{2} \mathbb{5} \text{Filing Fee & Certified Copy}\$			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Clifton Executive Center Circle Tallahassee, Florida 32301 Tallahassee, Florida 32301			

CR2E079 (2/14)



SECRETARY OF STATE TALLAHASSEE, FLORIDA

15 MAR 26 PM 3: 43

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)

	limited liability company as it appears on the records of the Florida Depart MULTI-TRUCK LLC	tment
2. The Florida doc	ument/registration number assigned to this limited liability company is:	
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:	
REATRIZ P.		
AMBR		
	(Print Title)	
of this limited lia resignation in w	bility company and affirm the limited liability company has been notified citing	of my
Signature of D	ssociating Member or Resigning Manager	
	\$25.00 (Required) \$30.00 (Optional)	