<u>L15000084290</u>

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dusiness Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
· -
Special Instructions to Filing Officer:

Office Use Only



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June 27, 2016

NEUMAN BELIZARIO 3409B NW 72ND AVE MIAMI, FL 33122

SUBJECT: ALL NATIONWIDE TRUCKING SERVICES, LLC

Ref. Number: L15000084290

We have received your document for ALL NATIONWIDE TRUCKING SERVICES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Letter Number: 216A00013466

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	Registration Section	
	Division of Corporations	
SUBJ	TECT: ALL NATIONWIDE (Name of Limited Liability)	TRUCKING SENVICES, 114
The e	nclosed member, resignation or dissociation and	fee(s) are submitted for filing.
Please	e return all correspondence concerning this matte	er to:
	Hermon Belisopio	
	(Contact Person)	
	All Nationus de Inching services	, llf
	3409B NW 72 Ave	
	Milmi Al 33122	
	(City/State and Zip Code)	
For fi	urther information concerning this matter, please	call:
	Neumh Belisspid at (30	5 9707887
·	(Name of Contact Person) (Area	Code & Daytime Telephone Number)
	osed please find a check made payable to the Floring Fee \$\square\$ \$551	rida Department of State for: Filing Fee & Certified Copy
STRI	EET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section		Registration Section
	ion of Corporations	Division of Corporations
Clifton Building		P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301



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:	ILL Nationwide Trucking Services, 14
2. The Florida doc	ument/registration number assigned to this limited liability company is:
_ 4 1500	000 84290
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
	Name of Person Resigning), hereby withdraw/resign as a
MGI	25 25
γ	(Print Title)
of this limited lia resignation in w	ability company and affirm the limited liability company has been notified of my riting.
New	will farer
Signature of	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)