

Y. J. KER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STALLION TRANSPORTATION LLC
Name of Limited Liability Company
DOCUMENT NUMBER: L15000180174

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:

NICOLAS SIHA

Name of Person

LEGALINC CORPORATE SERVICES INC.

Name of Firm/Company

17350 STATE HIGHWAY 249, SUITE 220

Address

HOUSTON, TX 77064

City/State and Zip Code

NICK.S@INCFILE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICOLAS SIHA 713 478-1040
Name of Person at () 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,
LEGALINC CORPORATE SERVICES INC.

_____, hereby resigns as
Name of Registered Agent

Registered Agent for _____
STALLION TRANSPORTATION LLC

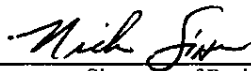
Name of Limited Liability Company

L15000180174

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.



Signature of Resigning Agent

If signing on behalf of an entity:

NICOLAS SIHA

Typed or Printed Name
VICE PRESIDENT

Capacity

FILED
TALLAHASSEE, FLORIDA
17 APR - 7 PM 3:05

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withdrawn limited liability company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