1170000 43981

(R	equestor's Name)	-	
(A	ddress)		
(A	ddress)		
(C	ity/State/Zip/Phone	#)	
PICK-UP	MAIT	MAIL.	
(B	usiness Entity Nam	e)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to	o Filing Officer:		

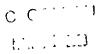
Office Use Only



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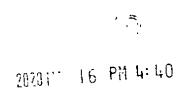
2020 H. O. 1 & PH 4: 1:0



COVER LETTER

TO:	Regis	stration Section		•
	Divis	sion of Corporations		
SUBJ	JECT:	Mikway Logistics LLC		
		(Name of Li	mited Liability Co	ompany)
The e	nclosec	d member, resignation or dissoc	ciation and fee	(s) are submitted for filing.
Please	e return	all correspondence concerning	g this matter to	*
Mikala	ni Mirutk	a.		
		(Contact Person)		
Mikwa	ıy Logisi	tics LLC		
		(Firm/Company)		_
РО Во	x 22372	4		
		(Address)		_
West F	² alm Bea	ach, FL 33422		
		(City/State and Zip Code)		_
For fu	irther ii	nformation concerning this mat	ter, please call	:
Mikala	ii Mirutk	a a	561 at (203-5775
	(N	ame of Contact Person)		le & Daytime Telephone Number)
Enclo	sed ple	ase find a check made payable	to the Florida	Department of State for:
= \$2	5 Filing	g Fee	□ \$55 Filir	ng Fee & Certified Copy
		ng Address:		Street Address:
		stration Section		Registration Section
		ion of Corporations Box 6327		Division of Corporations
		hassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	1 4114	(100000, 1 L 72314		Tallahassee, FL 32303





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)

	e limited liability company as it appears on the records of the Florida Departmen WAY LOGISTICS LLC
2. The Florida doc L17000043981	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
Milealai Mieurlea	
Member/Manage	
	(Print Title)
of this limited lia resignation in wi	bility company and affirm the limited liability company has been notified of my iting.
Signature of D	issociating Member or Resigning Manager
Filing Fee; Certified Copy:	\$25.00 (Required) \$30.00 (Optional)