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(Re	equestor's Name)	
(Ad	ddress)	
(Ad	ddress)	<u> </u>
(Ci	ity/State/Zip/Phone	e #)
PłCK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	me)
(Di	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: NATION HAULERS LLC	2		
(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:			
JACQUELINE C. Canela (Contact Person)			
(Contact Person)			
NATION HAULERS LLC (Firm/Company)			
(Firm/Company)			
7315 NW 36 Street (Address)			
(Address)			
MIAMI, R 33166 (City/State and Zip Code)			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
SACQUELINE C. Canela at 186) (Name of Contact Person) (Area Code &	488-3890		
(Name of Contact Person) (Area Code &)	Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for: \$\sqrt{1}\$\$\$\$25 Filing Fee \$\sqrt{2}\$			
,			
	AILING ADDRESS:		
	egistration Section		
•	vision of Corporations		
	O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301			
Tallallassee, Tiorida 52501			

CR2E079 (2/14)





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 ap	pears on the records of the Florida Department
of State is:	MATION HAULERS	LLC.
2. The Florida docu	ıment/registration number assign	ed to this limited liability company is:
41200	000 5469 8	
3. The date this me	mber/manager withdrew/resigned	or will withdraw/resign is: March 27, 2017.
4. I, <u>CRISTIA</u>	IA M. Valdes Jame of Person Resigning)	
	RM) (Print Title)	
of this limited lial resignation in wr		aited liability company has been notified of my
Oustina	M. Valdes	
Signature of Di	ssociating Member or Resigning	Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	