11700078308

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





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03/12/18--01006--023 **25.00

2018 MAR 12 A D 12

D. SCOTT

COVER LETTER

TO: Registration Section Division of Corporations				
SOLID AUTO TRANSPO				
(Name of I	Limited Liability Com	ipany)		
The enclosed member, resignation or diss	ociation and fee(s) are submitted fo	r filing.	
Please return all correspondence concerni	ng this matter to:			
GEORGE M. MIRANDA				
(Contact Person)	<u> </u>	-		
SOLID AUTO TRANSPORT LLC				
(Firm/Company)		-		
10360 SW 186TH ST. UNIT 972396				
(Address)		-		
MIAMI, FL 33197			2011	
(City/State and Zip Code)		-	五五五	-11
For further information concerning this m	natter, please call:		TALL All MOSE E. F. June Number)	TIL
GEORGE M. MIRANDA	305	332 6441		
(Name of Contact Person)	at (at (Area Code	& Daytime Teleph	none Number)	
Enclosed please find a check made payable \$25 Filing Fee		epartment of Stat Fee & Certified (e for:	
STREET/COURIER ADDRESS:		MAILING ADI	DRESS:	

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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)

SOI	e limited liability company as it appears on the repulsion AUTO TRANSPORT LLC	cords of the Florida Department
2. The Florida doc L1700007830	cument/registration number assigned to this limite 08	ed liability company is:
CYNTHIA M	nember/manager withdrew/resigned or will withdr	
(Print) VICE PRESI	Name of Person Resigning)	2 17
	(Print Title)	
of this limited lia resignation in w	ability company and affirm the limited liability co	ompany has been notified of my
Signature of 15	Dissociating Member or Resigning Manager	-
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	