L17000 130797

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Young Transporters LLC	
(Name of	f Limited Liability Company)
The enclosed member, resignation or dis	ssociation and fee(s) are submitted for filing.
Please return all correspondence concerr	ning this matter to:
Marlon Young	•
(Contact Person)	
(Firm/Company)	
226 N. Nova rd #103	
(Address)	
Ormond Beach, FL 32174	
(City/State and Zip Code)	
For further information concerning this i	matter, please call:
Marlon Young	at (386 265 266)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made paya	ble to the Florida Department of State for:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

Tallahassee, FL 32314



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 a	s it appears on the records of the Florid	a Department
of State is: Young	g Transporters LLC		·
2. The Florida docu	ıment/registration number a	issigned to this limited liability compan	y is:ᢅ⊊
L17000130797		·	· · · · · · · · · · · · · · · · · · ·
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is: 11/1/2	2022
4. I. Jessica Young (Print No.	ame of Person Resigning)	, hereby withdraw/resign as a	
AMBR	Print Title)		
of this limited lial resignation in wri	• •	he limited liability company has been n	otified of my
Signature of Di	ssociating Membe r of Resig \$25.00 (Required)	gning Manager	
Certified Copy:	\$30.00 (Optional)		