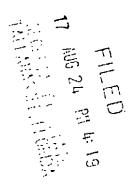
## L17000141035

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





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## COVER LETTER

**TO:** Registration Section Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301

CR2E079 (2/14)

| 1 11 TDANCDORT 9 1  | OCICTICS LICA LLC   |
|---|---|
| SUBJECT: L H TRANSPORT & LOGISTICS USA LLC  (Name of Limited Liability Company) |   |
|   |   |
| The enclosed member, resignation or dissociation                                | on and fee(s) are submitted for filing.   |
| Please return all correspondence concerning this                                | s matter to:  |
| MARIA DE LOS ANGELES GONZAL   | .EZ   |
| (Contact Person)  | <del></del>   |
| AMARO ACCOUNTING SERVICES   | PA  |
| (Firm/Company)  |   |
| 3107 NE 4TH STREET  |   |
| (Address)   |   |
| HOMESTEAD FLORIDA 33033   |   |
| (City/State and Zip Code)   |   |
| For further information concerning this matter,                                 | please call:  |
| MARIA DE LOS ANGELES GONZALEZ   | please call:  786  (Area Code & Daytime Telephone Number)  the Florida Department of State for: |
| (Name of Contact Person)  | (Area Code & Daytime Telephone Number)  |
| Enclosed please find a check made payable to the \$25 Filing Fee                | he Florida Department of State for:   |
| STREET/COURIER ADDRESS:   | MAILING ADDRESS:  |
| Registration Section  | Registration Section  |
| Division of Corporations Clifton Building                                       | Division of Corporations P.O. Box 6327  |

Tallahassee, Florida 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)

| The name of the limited liability company as it appears     of State is:  L H TRANSPORT & LOGISTICS US                            | •                                     |
|---|---------------------------------------|
| 2. The Florida document/registration number assigned L17000141035   | to this limited liability company is: |
| 3. The date this member/manager withdrew/resigned of this limited liability company and affirm the limite resignation in writing. | nereby withdraw/resign as a           |
| Signature of Dissociating Member or Resigning M Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)                 | anager                                |