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Division of Comporations

Fax Number : (850)617-6383

From:

Account Name : SPIEGEL & UTRERA, P.A.

Account Number : FCA000000001

Fhone : (305)854-6000 Fax Number : (305)860-2076

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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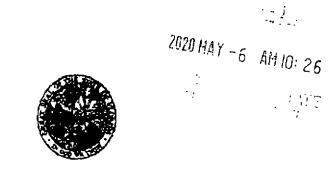
LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 24/7 TRAFFIC SCHOOL-REALITY DRIVING SCHOOL, LLC

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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)

i. The name of the li	imited liability company as i	t appears on the records of the Florida Department
of State is: 24/7	TRAFFIC SCHOOL-REA	LITY DRIVING SCHOOL, LLC
2. The Florida docum	nent-registration number ass	igned to this limited liability company is:
L1700014107	73	
3. The date this mon	nber/manager withdrew/resig	gned or will withdrawliesign is: MAY 7, 2020
4 I. ALBERTO E	PASTRANA mu of Person Resigning)	hereby withdraw/resign as a
	nager, Secretary	
of this limited liabi resignation in writi		limited liability company has been notified of my
Signature of Div	sociating Member or Resign	ing Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	

CR38079 (27)41