117000186568

(Requestor's Name)	
(Address)	70030
(Address)	7 0000
(City/State/Zip/Phone #)	12/12/17
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		
VERDIAL TRUCKING LLC SUBJECT:		
SUBJECT: (Name of Limite	ed Liability Con	npany)
The enclosed member, resignation or dissociat		
Please return all correspondence concerning th	nis matter to:	
LUIS VERDIAL		
(Contact Person)		-
VERDIAL TRUCKING LLC		
(Firm/Company)		-
5740 LAKESIDE DR APT. 318		
(Address)		-
MARGATE, FL 33063		
(City/State and Zip Code)		-
For further information concerning this matter	, please call:	
LUIS VERDIAL	305	879-4930
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to ■ \$25 Filing Fee		Department of State for: (Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: 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)

	limited liability company as	it appears on the records of the Florida Department
2. The Florida docu L17000186568	•	ssigned to this limited liability company is:
3. The date this me	mber/manager withdrew/res	igned or will withdraw/resign is:
MICHEL VE	PDIAL	, hereby withdraw/resign as a
AMBR		
	(Print Title)	
of this limited lia resignation in wr	• •	e limited liability company has been notified of my
· A Had	<i>!</i> ·	
Signature of Di	ssociating Member or Resig	ning Manager
	\$25.00 (Required) \$30.00 (Optional)	