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#### **COVER LETTER**

	egistration Section ivision of Corporations		
SUBJEC	Venus Transportation LLC T:		
		ted Liability Cor	npany)
The enclo	sed member, resignation or dissocia	ation and fee(s	e) are submitted for filing.
Please ret	urn all correspondence concerning t	his matter to:	
Iliana Ru	ıiz		
	(Contact Person)		-
	(Firm/Company)		_
956 SW	143 Place		
	(Address)		_
Miami, F	EL 33184		
	(City/State and Zip Code)		_
For furth	er information concerning this matte	er, please call:	
Iliana Ri	ıiz	305 at (	4508131
	(Name of Contact Person)		& Daytime Telephone Number)
Enclosed ■ \$25 Fi	please find a check made payable to ling Fee		Department of State for: g Fee & Certified Copy
Registrat Division Clifton B 2661 Exe	COURIER ADDRESS: on Section of Corporations uilding cutive Center Circle ee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)



### FILED 2017 NOV 20 PM 3- 46 SECRETARY OF STATE TALLAHASSEE. FLORID;

#### 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)

	e limited liability company as it appears on the records of the Florida Department aus Transportaion
	rument/registration number assigned to this limited liability company is:
3. The date this m	ember/manager withdrew/resigned or will withdraw/resign is:
4. I	nontes, hereby withdraw/resign as a  Name of Person Resigning)
(Print) AMBR	Name of Person Resigning)
•	(Print Title)
of this limited lia resignation in w	ability company and affirm the limited liability company has been notified of my riting.
Youn	issociating Member or Resigning Manager
Sepature of D	issociating Member or Resigning Manager
	\$25.00 (Required)
Certified Conv:	\$30.00 (Ontional)