118000047602

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TO:	Registration Section		•
	Division of Corporations		
SUBJ	DRA TRANSPORT, LLC		
	(Name of L	imited Liability Co	ompany)
The e	nclosed member, resignation or disso	ociation and fee	(s) are submitted for filing.
Please	e return all correspondence concernir	ng this matter to	o:
Mickey	y Lawson		
	(Contact Person)		
DRA T	FRANSPORT, LLC		
	(Firm/Company)		_
222 HC	DLLAND ST		
	(Address)		<u> </u>
LAKE	WALES, FLORIDA 33859		
	(City/State and Zip Code)		
For fu	orther information concerning this ma	atter, please call	l:
MICK	EY LAWSON	863 at (589-6812
	(Name of Contact Person)	(Area Cod	le & Daytime Telephone Number)
Enclo:	sed please find a check made payable	e to the Florida	Department of State for:
	5 Filing Fee		ng 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
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303









DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

		y as it appears on the records of the Florida Department
2. The Florida doc L18000047602		r assigned to this limited liability company is:
3. The date this m 4. I, ABDULGANN (Print i	ember/manager withdrew/i IU AREGBUSOLA Name of Person Resigning)	resigned or will withdraw/resign is: 10/13/2021, hereby withdraw/resign as a
of this limited lia	(Print Title) ability company and affirm	the limited liability company has been notified of my
resignation in wi	issociating Member or Res	signing Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	