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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Truck Hub, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L18000133575

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brian K. Mathis, Esq.

Name of Person

Mathis Law Group

Name of Firm/Company

P.O. Box 91657

Address

Lakeland, FL 33804

City/State and Zip Code

luis@gofreighthub.io

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jo Kirkland, ACP, FRP

Name of Person

at (863) 670-2557
Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 3, 2025

BRIAN MATHIS
MATHIS LAW GROUP
P.O. BOX 91657
LAKE LAND, FL 33804

SUBJECT: TRUCK HUB LLC
Ref. Number: L18000133575

We have received your document for TRUCK HUB LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 425A00002180

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Brian K. Mathis _____, hereby resigns as
Name of Registered Agent

Registered Agent for Truck Hub LLC _____
Name of Limited Liability Company

L18000133575 _____
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Brian K. Mathis

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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