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	(Requestor's Name)		
(Address)			
(Address)			
	(City/State/Zip/Phone #)		
PICK-U	P WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of 9	Status	
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COVER LETTER

Division of Corporations	•	
RCP Transport ELC SUBJECT:		
(Name of Lim	ited Liability	Company)
The enclosed member, resignation or dissoci	ation and fe	ee(s) are submitted for filing.
Please return all correspondence concerning	this matter	to:
Robert O Patterson .		•
(Contact Person)	<u>-</u> -	
RCP Transport ELC		
(Firm/Company)		•
6414 E Holly Street		
(Address)		·
Inverness, FL 34452		
(City/State and Zip Code)		
For further information concerning this matter	er, please ca	ıli:
Robert O Patterson	352	476-6670
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed please find a check made payable to ☐ \$25 Filing Fee		a Department of State for: ling Fee & Certified Copy
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

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)

1. The name of the	limited liability company as	it appears on the records of the Florida Department		
of State is: RCP	Transport LLC			
2. The Florida document/registration number assigned to this limited liability company is:				
L18000177126		·		
3. The date this me	mber/manager withdrew/res	igned or will withdraw/resign is: 01/01/2020		
4. I. Collen Curry (Print Name of Person Resigning)		hereby withdraw/resign as a		
(Print N Manager	same of Person Resigning)			
	(Print Title)			
of this limited lia resignation in wr		e limited liability company has been notified of my		
Colles	~ Cus			
Signature of D	issociating Member or Resig	ning Manager		
	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			