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(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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11/20/18--01012--035 **25.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: JC Freight Transport LL (Name of Limited Liability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Carolina De Los Angeles Valdes (Contact Person)
(Firm/Company)
7602 West 30 Lane
Hialeah Gardens, FL 33018 (City/State and Zip Code)
For further information concerning this matter, please call:
Caroling De Los Angeles Valdes (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: MAILING ADDRESS:

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

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)

	1. The name of the l	limited liability company as it appears on the	records of the Flori	ida Department
	of State is:	C Freight Tra	insport	LLC.
	2. The Florida docu	ment/registration number assigned to this lim	nited liability compa	any is:
intity #	! <u>L18000</u>	0226111		
•	3. The date this mer	mber/manager withdrew/resigned or will with	ıdraw/resign is:	11/9/18
	4.1, Caroling	mber/manager withdrew/resigned or will with De Los Angeles, hereby with ame of Person Resigning)	hdraw/resign as a	, ,
		GGET (Print Title)		
	of this limited liab	pility company and affirm the limited liability	company has been	notified of my
	resignation in wri			 &3
	Signature of Dis	ssociating Member or Resigning Manager		NOV 20 PH
	Filing Fee:	\$25.00 (Required) \$30.00 (Optional)	1	1: 07