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(Re	equestor's Name)				
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COVER LETTER

·	gistration Section		
Div	vision of Corporations		
SUBJECT	Mass Movement Logistic	s LLC	
	npany)		
The enclose	ed member, resignation or diss	sociation and fee(s) are submitted for filing.
Please retur	rn all correspondence concerni	ing this matter to:	
Marcus Pi	ratt		
 	(Contact Person)		-
	(Firm/Company)		-
6619 Star	k Rd		
	(Address)	-	-
Seffner, F	lorida 33584		
	(City/State and Zip Code)		-
For further	information concerning this m	natter, please call:	
Marcus Pr	ratt	813	808-0049
(Name of Contact Person)		& Daytime Telephone Number)
_	lease find a check made payab		
□ \$25 Filir	ng Fee	₩ \$55 Filing	Fee & Centified Copy
	COURIER ADDRESS:		MAILING ADDRESS:
Registration			Registration Section
	Corporations		Division of Corporations
Clifton Bui			P.O. Box 6327
	ative Center Circle		Tallahassee, Florida 32314
Lallahassee	e, Florida 32301		

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)

	e limited liability company as i	it appears on the records of the Flor	rida Department
2. The Florida doc	ū	signed to this limited liability comp	
4. I, Carole White	<u>.</u>	gned or will withdraw/resign is:, hereby withdraw/resign as a	TALESTE TARY OF
Manager	(Print Title)		PH 2:21 OF STATES
of this limited lia resignation in wi		limited liability company has been	notified of my
Signature of D	issociating Member or Resign	ing Manager	
Filing Fee:	\$25.00 (Required)		