L19 CCC112696

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone #	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	-	
	J. HORNE DEC - 2 2021	
	DEC - 2 2021	
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SECRETARY OF STATE

Please Send Certifiel Opy to address Hopeton 12 en 1979 old Town Rol Briologe port CT 06606 Than 12 404.

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SECRETARY OF STATE TALLAHASSEE, FL. 44

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)

	he limited liability company as it appears on the records of the Florida Departmen RR'S TRANSPORTATION, LLC
2. The Florida de	ocument/registration number assigned to this limited liability company is:
3. The date this r	member/manager withdrew/resigned or will withdraw/resign is:
HOPETON K	
MGR	
	(Print Title)
of this limited leading of this limited leading of the control of this limited leading of the control of this limited leading of the control of this limited leading of the control of the control of this limited leading of the control of	iability company and affirm the limited liability company has been notified of my writing.
Hobe	ton 12em
Signature of	Dissociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)

Certified Copy:

\$30.00 (Optional)