## 

(Requestor's Nar	ne)
(Address)	
(Address)	
(City/State/Zip/Ph	none #)
PICK-UP WAIT	MAIL
(Business Entity	Name)
(Document Numb	per)
Certified Copies Certifica	ates of Status
Special Instructions to Filing Officer:	
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04/10/24--01011--017 \*\*25.00



## COVER LETTER

Divi	sion of Corporations		
SUBJECT:	M & G TRANSPORTING LLC	2	
(Name of Limited Liability Company)			
The enclosed	d member, resignation or di	ssociation and fee	(s) are submitted for filing.
Please return	all correspondence concer	ning this matter to	o:
Gabriella M. R	Realin		
	(Contact Person)	· <del></del>	_
M & G TRAN	SPORTING LLC		
	(Firm/Company)		<del>_</del> -
2495 West 65	Street		
	(Address)		<del></del> .
Hialeah , Fl 33	016		
	(City/State and Zip Code)		<del></del>
For further in	nformation concerning this	matter, please call	l:
Gabriella Real	in	786 at (	897 - 2914
(N	lame of Contact Person)	(Area Cod	le & Daytime Telephone Number)
Enclosed ple	ease find a check made paya	ible to the Florida	Department of State for:
■ \$25 Filing	g Fee	□ \$55 Filir	ng Fee & Certified Copy
	ng Address:		Street Address:
Regis	stration Section		Registration Section
	sion of Corporations		Division of Corporations
	Box 6327 hassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
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Tallahassee, FL 32303

CR2E079 (2/14)

TO: Registration Section



## 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:	
2.	The Florida document/registration number assigned to this limited liability company is:	
	L19000141303	
3.	The date this member/manager withdrew/resigned or will withdraw/resign is: $0.08/2024$	
4.	Gabriella M Realm	
	(Print Name of Person Resigning)	
	Manager ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	(Prim Title)	
1	Of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.	
	Signature of Dissociating Member or Resigning Manager	

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)