# L19000204762

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

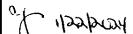
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# **COVER LETTER**

SUBJECT: Incentive Transport LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L19000204762

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

United States Corporation Agents, Inc.

Name of Person

Legalzoom.com, Inc.

Name of Firm/Company

9900 Spectrum Dr.

Address

Austin, TX 78717

City/State and Zip Code

raresignations@legalzoom.com

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

# MAILING ADDRESS:

Registration Section Division of Corporations

· TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET ADDRESS:

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

# STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 605.0115. Florida Statutes, the undersi	gned.
United States Corporation Agents, Inc.		ereby resigns as
	Name of Registered Agent	creby resigns as
Registered Agent for	centive Transport LLC	
	Name of Limited Liability Company	·
L19000204762		
Document Nu	imber, if known	
	on was mailed to the above listed limited liability co	
	Signature of Resigning Agent	
If signing on behalf of an entity:		731
	Cheyenne Moseley	2023 F 32 22
	Typed or Printed Name	2
	Asst. Secretary for United States Corporation Agent	ts, Inc.
	Capacity	. <u> </u>

**FILING FEES:** 

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314