L2C OCCU45127

(Requestor's Name)			
(Address)	6003545867		
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL	11/09/2001019		
(Business Entity Name)			
(Document Number)	S =2; =		
Certified Copies Certificates of Status	DEC 1 5 1210		
Special Instructions to Filing Officer:			
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Office Use Only

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TO: Registration Section Division of Corporations

SUBJECT: MRC Transport LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L20000045127	<u> </u>
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to t	he following:
United States Corporation Agents, Inc.	
Name of Person	-
Legalzoom.com, Inc.	
Name of Firm/Company	-
101 North Brand Blvd. 11th Floor	
Address	-
Glendale, CA 91203	
City/State and Zip Code	-
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call:	
800 at (773-0888
Name of Person Area Code	Daytime Telephone Number

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

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 provisi	ons of section 605.011	5. Florida Statutes, the under	signed.	
United States Cor	poration Agents, In	IC.	hereby resigns as	
	Name of Registered Age			
Registered Agent for _	MRC Transport LL	C		
	Name of Lin	nited Liability Company		,
L20000045127				
Document	Number, if known			
A copy of this resigna	tion was mailed to the	above listed limited liability of	company at its last known	address.
The agency is termina	ted and the office disco	ontinued on the 31st day after	the date on which this sto	atement is filed.
		Signature of Resigning Agent		
		Signature of Resigning Agent		
It signing on behalf of	an entity:			
	Cheyenne Mose	eley		_
	7	Typed or Printed Name		27211401
	Asst. Secretary for U	Jnited States Corporation Age	ents, Inc.	至
		Capacity		6- nl
	<u>FILING</u> \$ 85.00 \$ 25.00	Active limited liability co	ompany od/ voluntarily dissolved/	AHH: 18

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