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(₩€	equestor's Name)	
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(AC	dress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Eiling Officer	
	Timing Officer.	
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Daytime Telephone Number
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ivision of Corporations
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2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



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)

FEDER	mited liability company as it appears on the records of the Florida Department AL MOTOR CARRIER AUTHORITY FILINGS LLC
2. The Florida docum	nent/registration number assigned to this limited liability company is:
3. The date this mem	ber/manager withdrew/resigned or will withdraw/resign is:
4. I. DENITSA DIMITE	IOVA
	. hereby withdraw/resign as a see of Person Resigning)
MANAGER	RE I T
(Pi	rint Title)
of this limited liabil resignation in writing	ity company and affirm the limited liability company has been notified of my ng.
Dunita Dimitrona DAGLEGOSTANATE	元
Signature of Diss	ociating Member or Resigning Manager
Filing Fee: Certified Copy:	