

L2000 174827

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

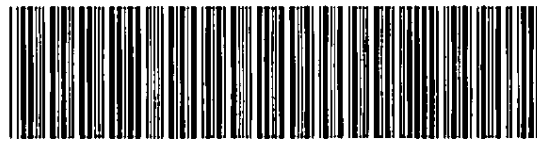
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400349506894

00/12/20 10:01:00 ***55.00

FILED
CLERK OF STATE
2007 12 APR 12
OFFICE OF THE CLERK OF STATE

Dissociation
of
Member

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JG&P TRUCKING, LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Joanie L. Gaskin

(Contact Person)

JG&P TRUCKING, LLC

(Firm/Company)

1945 SW 7th PL

(Address)

Ocala, Florida 34471

(City/State and Zip Code)

For further information concerning this matter, please call:

Joanie L. Gaskin

(Name of Contact Person)

at (352) 732-6485
(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 JUL 12 PM 1:12



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: JG&P TRUCKING, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L20000174827

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 2 August 2020

4. I, Walter J. Poole Sr., hereby ~~witness~~/resign as a
(Print Name of Person Resigning)
 Manager
.
(Print Title)

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

FILED
CLERK OF DISTRICT COURT
DISTRICT OF COLUMBIA
2005 DEC 12 PM 11:12