120000320163

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

Office Use Only



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COVER LETTER

Division of Corporations	
SUBJECT: 305 Express Transportation LLC	
	nited Liability Company)
The enclosed member, resignation or dissoci	iation and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to:
Neil Diaz	
(Contact Person)	
305 Express Transportation LLC	
(Firm/Company)	
15660 SW 82nd Circle LN Apt 68	
(Address)	
Miami, FL 33193-5044	
(City/State and Zip Code)	
For further information concerning this matte	er, please call:
Neil Diaz	305 509-1563 at ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable t	to the Florida Department of State for:
S25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 81
rananassee, FL 32314	Tallahassee, FL 32303

CR2E079 (2/14)

FILED



2022 JAN 10 AM 7: 19

SECRETARY OF STATE TALLAHASSEE, FL

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)

The name of the limited liability company as it appears on the records of the Florida Department of State is: 305 Express Transportation LLC			
2. The Florida docu L20000320163	ment/registration number ass	gned to this limited liability company is:	
3. The date this me	mber/manager withdrew/resig	ned or will withdraw/resign is: 07/15/2021	
4. 1. Liset Carmenate **Print No. 1.		, hereby withdraw/resign as a	
(Print Title)		
of this limited liab		limited liability company has been notified of my	
Signature of Di	ssociating Member or Resigni	ng Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		