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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: COSMOS TRANSPORT LLC	
(Name of Limited Liability	Company)
The enclosed member, resignation or dissociation and fe	ee(s) are submitted for filing.
Please return all correspondence concerning this matter	to:
VANESA PEKAREK	
(Contact Person)	
(Firm/Company)	
2300 N 23rd Ave unit 4	
(Address)	
HOLLYWOOD FL 33020	
(City/State and Zip Code)	
For further information concerning this matter, please ca	all:
VANESA PEKAREK 954	8162764
(Name of Contact Person) (Area C	ode & Daytime Telephone Number)
Enclosed please find a check made payable to the Floric ■ \$25 Filing Fee	da Department of State for: ling 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



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 a of State is: COSMOS TRANSPORT LLC	
2. The Florida document/registration number assig	
3. The date this member/manager withdrew/resign	ed or will withdraw/resign is:
4. I. VANESA PEKAREK (Print Name of Person Resigning)	
VANESA PEKAREK	
(Print Title)	
of this limited liability company and affirm the li- resignation in writing.	imited liability company has been notified of my
Signature of Dissociating Member or Resignin	g Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$50.00 (Optional)	-6 AH 8:2