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Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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## LLC REGISTERED AGENT RESIGNATION DEVON LOGISTICS LLC

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## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	of section 605.0115, Florida Statutes, the undersigned	d,
KEVIN L. DEEB	, hereby resigns as	
	ame of Registered Agent	,
Registered Agent for DEV	ON LOGISTICS, LLC	
	Name of Limited Liability Company	,
	Name of Littleed Liability Company	
1.21000112151		
Document Num	ber, if known	
A copy of this resignation	was mailed to the above listed limited liability comp	any at its last known address.
	and the office discontinued on the 31st day after the o	
-	Signature of Resigning Agent	
If signing on behalf of an	entity:	-: . <b>2</b> 0
	. :	APPRO AN FIL 2023 AUG -2 SECRETAS FALL MIKSS
-	Typed or Printed Name	
	· · · · · · · · · · · · · · · · · · ·	
	Capacity	PH 5: 6
	FILING FEES: \$ 85.00 Active limited liability compa \$ 25.00 Administratively dissolved/	iny oluntarily dissolved/

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

withdrawn limited liability company