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COVER LETTER

SUBJECT: Lehigh Logistics LLC Name of Limited Liability Company DOCUMENT NUMBER: L21000232910 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 9900 Spectrum Dr. Address Austin, TX 78717 City/State and Zip Code raresignations@legalzoom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

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

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ions of section 605.0115, Florida Statutes, the under	signed,
United States Corporation Agents, Inc.		, hereby resigns as
	Name of Registered Agent	nereby resigns as
Registered Agent for _	Lehigh Logistics LLC	-
	Name of Limited Liability Company	· · · · · · · · · · · · · · · · · · ·
L21000232910		
Document?	Number, if known	
A copy of this resignat	tion was mailed to the above listed limited liability of	company at its last known address.
The agency is terminat	ted and the office discontinued on the 31st day after	the date on which this statement is filed.
	Signature of Resigning Agent	
If signing on behalf of	an entity:	
	Cheyenne Moseley	
	Typed or Printed Name	· · · · · · · · · · · · · · · · · · ·
	Asst. Secretary for United States Corporation Age	ents, Inc.
	Capacity	

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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