L22000385453

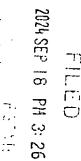
| (Requestor's Name) |
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| , |
| (City/State/Zip/Phone #) |
| (Oity/State/Ziph Holle #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
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| Certified Copies Certificates of Status |
| |
| <u> </u> |
| Special Instructions to Filing Officer: |
| <i></i> |
| Sr. MORNA |
| SEP 4 2024 |
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COVER LETTER

TO: Registration Section Division of Corporations

| _{subject:} Dvi9 Transportation LLC | |
|--|----|
| Name of Limited Liability Company | |
| DOCUMENT NUMBER: L22000385453 | |
| The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitt for filing. | ed |
| 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: | |
| Name of Person at (800) 773-0888 Area Code Daytime Telephone Number | |

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provisions of section 605.0115, Florida Statutes, the u | undersigned, | |
|--|--|------------|
| United States Corporation Agents, Inc. | _ | |
| Name of Registered Agent | , hereby resigns as | د - |
| Registered Agent for Dvi9 Transportation LLC | | EILE |
| | | 0 |
| Name of Limited Liability Company | 20. 2 | |
| L22000385453 | 28 | • |
| Document Number, if known | • | |
| A copy of this resignation was mailed to the above listed limited liabil | | |
| The agency is terminated and the office discontinued on the 31st day a | after the date on which this statement is file | ed. |
| Trik Treutlein | | |
| Signature of Resigning Age | ent | |
| If signing on behalf of an entity: | | |
| Erik Treutlein | | |
| Typed or Printed Name | | |
| Vice President on behalf of United States Corporatio | on Agents, Inc. | |
| Capacity | | |

FILING FEES: \$ 85.00 Active \$ 25.00 Admi Active limited liability company
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