L23000081017

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: VALOR LOGISTICS LLC				
Name of Limited Liabilit	y Company			
DOCUMENT NUMBER: L23000081017	-			
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are	e subr	nittec	3
Please return all correspondence concerning this matter to t	he 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	_	(1)	55	
raresignations@legalzoom.com	Ÿ		2023 NOV -	المسلمة
E-mail address: (to be used for future annual report notification)	_ }-	! !	- 70	# E
For further information concerning this matter, please call:	Çi Çi		ထ] [[]
at (773-0888	٠ ٩٩ د د د د د د	FH I: L	ا ب بعادی ارسا
Name of Person Area Code	Daytime Telephone Number (-	111	<u>-</u>	

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisi	ions of section 605.011	5, Florida Statutes, the und	lersigned.			
United States Corporation Agents, Inc.			_ , hereby resigns as			
	_ thereby resigns as					
Registered Agent for	VALOR LOGISTIC	SLLC				
	Name of Lin	nited Liability Company				
L23000081017						
Document ?	Number, if known					
A copy of this resignat	tion was mailed to the a	above listed limited liability	v company at its last l	known add	lress.	
The agency is terminat	ted and the office disco	ontinued on the 31st day aft	er the date on which t	this statem	ent is	filed.
		<i>A</i>				
		Signature of Resigning Agent				
If signing on behalf of	an entity:			Ç)	26	
	Cheyenne Mose	eley		158 158	2923 NOY	* F Lighter
Typed or Printed Name					10	¥ £
	Asst. Secretary for United States Corporation Agents		gents, Inc.	1:70	8	******
		Capacity		සිසි	T.	
						The state of
				1711	1	
	\$ 85.00 \$ 25.00	FEES: Active limited liability of Administratively dissolv withdrawn limited liabi	company red/ voluntarily disso lity company	olved/		

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