

MD0000001779

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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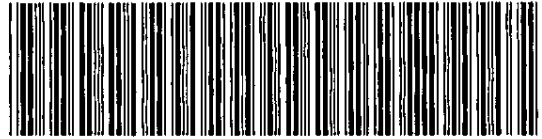
(Business Entity Name)

(Document Number)

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Date: 03/02/2016

Account #: I20000000088

Name: Michelle Walker

Reference #: D283399

ENTITY NAME: SOH TRANSPORTATION, LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Annual Report
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☒ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other: _____

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Authorized Amount: \$25

Signature: Michelle Walker

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SOH Transportation, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elizabeth A. Chapman

(Name of Person)

Parker Poe Adams & Bernstein LLP

(Firm/Company)

401 S. Tryon Street, Suite 3000

(Address)

Charlotte, NC 28202

(City/State and Zip Code)

For further information concerning this matter, please call:

Elizabeth A. Chapman

(Name of Person)

at (704) 335-9855
(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

SOH Transportation, LLC

(Name of limited liability company)

PA

(Jurisdiction of its organization)

09/01/2000

(Date registered with Florida Department of State)

M00000001779

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)

Margaret E. Wicklund, Vice President

(Typed or printed name of signee)

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TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00