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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCAC00000023
Phone: (850)205-8842
Fax Number: (850)878-5368

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LLC REGISTERED AGENT RESIGNATION WE CARE RECYCLING TRANSPORT, LLC

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JUN 21 2016 S. YOUNG TO: Registration Section Division of Corporations

COVER LETTER

SUBJECT: WE CARE RECYCLING			
DOCUMENT NUMBER: M130000	e of Limited Liabil 006899	ity Company	
The enclosed Resignation of Registered for filing.	Agent for a Limit	ed Liability Company and f	ee are submitted
Please return all correspondence concern	ning this matter to	the following:	
Kate Seldita			16 JUH 20
Name of Person			72
C T CORPORATION SYSTEM			
Name of Firm/Compan	y	_	
111 8th Avenue, 13th Floor			- 要の 0
Address			
New York, New York 10011			
City/State and Zip Code	ė	_	
kate.seiditia@wolterskluwer.com			
B-mail address: (to be used for future annu	al report notification)		
For further information concerning this s	matter, please call	:	
Kate Seidita	212	894-8526	
Name of Person	Area Cod	e Daytime Telephone Num	per
Enclosed is a check made payable to the liability company or \$25.00 for an admir liability company.			
MAILING ADDRESS:	STR	EET ADDRESS:	
Registration Section	Regis	tration Section	
Division of Corporations	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provi	sions of section 605.0115, Florida Statutes, the	undersigned,
C T CORPORAT	TON SYSTEM	, hereby resigns as
	Name of Registered Agent	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Registered Agent for		
WE CARE RECY	CLING TRANSPORT, LLC	
	Name of Limited Liability Company	
M13000006899		
Documen	t Number, if known	
;	ation was mailed to the above listed limited liab	
	Signature of Resigning Ag	gent
If signing on behalf of an entity:		
	C T Corporation System - Kate Sei	dita 20 SSS
	Typed or Printed Name	in c
	Assistant Secretary	
•	Capacity	9 (2)
<u>;</u>		9 8
		>

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

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company