## M2200005318

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
-
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600440151176

11/25/24--01022--006 \*\*85.00



## **COVER LETTER**

SUBJECT: 562 TRANSPORTATION LLC  Name of Limited Liability Company  DOCUMENT NUMBER: M2200005318  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:  Roselynne Vang  Name of Person  PARACORP INCORPORATED  Name of Firm/Company  2804 Gateway Oaks Dr #100  Address  Sacramento, CA 95833  City/State and Zip Code  RPVANG@MYPARACORP.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 533-7272 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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	TO: Registration Section Division of Corporations		
DOCUMENT NUMBER: M2200005318  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:  Roselynne Vang  Name of Person  PARACORP INCORPORATED  Name of Firm/Company  2804 Gateway Oaks Dr #100  Address  Sacramento, CA 95833  City/State and Zip Code  RPVANG@MYPARACORP.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 533-7272 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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  2661 Executive Center Circle	SUBJECT:		
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:  Roselynne Vang  Name of Person  PARACORP INCORPORATED  Name of Firm/Company  2804 Gateway Oaks Dr #100  Address  Sacramento, CA 95833  City/State and Zip Code  RPVANG@MYPARACORP.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 ) 533-7272  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  Division of Corporations  Division of Corporations  Clifton Building  2661 Executive Center Circle		ted Liabilit	y Company
Please return all correspondence concerning this matter to the following:  Roselynne Vang  Name of Person  PARACORP INCORPORATED  Name of Firm/Company  2804 Gateway Oaks Dr #100  Address  Sacramento, CA 95833  City/State and Zip Code  RPVANG@MYPARACORP.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  at (800	DOCUMENT NUMBER: M22000005318		
Roselynne Vang  PARACORP INCORPORATED  Name of Firm/Company  2804 Gateway Oaks Dr #100  Address  Sacramento, CA 95833  City/State and Zip Code  RPVANG@MYPARACORP.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 533-7272  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  Clifton Building  Tallahassec, FL 32314  2661 Executive Center Circle		or a Limite	d Liability Company and fee are submitted
Name of Person  PARACORP INCORPORATED  Name of Firm/Company  2804 Gateway Oaks Dr #100  Address  Sacramento, CA 95833  City/State and Zip Code  RPVANG@MYPARACORP.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 533-7272  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  Clifton Building  Tallahassec, FL 32314  2661 Executive Center Circle	Please return all correspondence concerning this	matter to 1	he following:
PARACORP INCORPORATED  Name of Firm/Company  2804 Gateway Oaks Dr #100  Address  Sacramento, CA 95833  City/State and Zip Code  RPVANG@MYPARACORP.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 S33-7272)  Name of Person  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  Clifton Building Tallahassee, FL 32314  2661 Executive Center Circle	Roselynne Vang		
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 )  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  Clifton Building  2661 Executive Center Circle	Name of Person		-
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 )  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  Clifton Building  2661 Executive Center Circle	PARACORP INCORPORATED		يس
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 )  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  Clifton Building  2661 Executive Center Circle	Name of Firm/Company		S. C. L. M. C. C.
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 )  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  Clifton Building  2661 Executive Center Circle	2804 Gateway Oaks Dr #100		ACCEPT OF THE PROPERTY OF THE
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 )  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  Clifton Building  2661 Executive Center Circle	Address		
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 )  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  Clifton Building  2661 Executive Center Circle	Sacramento, CA 95833		
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Roselynne Vang  Name of Person  at (800 )  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  Clifton Building  2661 Executive Center Circle	City/State and Zip Code		
For further information concerning this matter, please call:  Roselynne Vang  at (	RPVANG@MYPARACORP.COM		
Roselynne Vang  at (	E-mail address: (to be used for future annual report r	otification)	_
Name of Person  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  Clifton Building  Tallahassee, FL 32314  2661 Executive Center Circle	For further information concerning this matter, p	lease call:	
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  Clifton Building  Tallahassee, FL 32314  Area Code Daytime Telephone Number  Department of State for \$85.00 for an active limited limited liability company.		,800	533-7272
Inability 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	Name of Person	Area Code	Daytime Telephone Number
Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	liability company or \$25.00 for an administrative	Departmently dissolver	nt of State for \$85.00 for an active limited ed, voluntarily dissolved or withdrawn limited
Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS:		
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle		_	
Tallahassee, FL 32314 2661 Executive Center Circle	<u>-</u>		•
,			5
	Tallanassee, FL 32314		

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provi	sions of section 605.0115, Florid	la Statutes, the undersigned,	
PARACORP INC	CORPORATED	, hereby resigns as	
	Name of Registered Agent	, ,	
Registered Agent for	562 TRANSPORTATION	LLC	
	Name of Limited Liab	Situ Company	
	Name of Climited Liab	inty Company	
M22000005318			
Documen	Number, if known		
A copy of this resign	ation was mailed to the above lis	sted limited liability company at its last known address.	
The agency is termin	ated and the office discontinued	on the 31st day after the date on which this statement is file	d.
	Signatu	re of Resigning Agent	
If signing on behalf of	of an entity:	. 20	
	Abigale Peterson	A HADA	ç. 1 X
	Typed or P	rinted Name	ing Ki magazar
	Asst. Secretary for Par	acorp Incorporated 25	*1 *
	Capac	rinted Name racorp Incorporated ity	
		第3. 英·	
	\$ 25.00 Admi	e limited liability company nistratively dissolved/ voluntarily dissolved/ lrawn limited liability company	

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