

m22000019199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

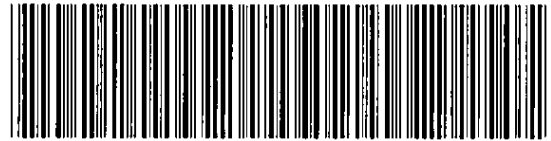
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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04/16/24--01004--015 **25.00

FILED
2024 AUG 13 AM 9:51
CLERK OF COURT
JULIA A. CUSHING

AUG 13 2024

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: REP Transport 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:

Ruben-A Esquivel Pardo
(Name of Person)

REP Transport LLC
(Firm/Company)

122 W. Brentridge Dr.
(Address)

Brandon FL 33511
(City/State and Zip Code)

For further information concerning this matter, please call:

Rachel Montero Cabrera at (523) 975-9645
(Name of Person) (Area Code & Daytime Telephone Number)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

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

SECRETARY OF STATE
TALLAHASSEE, FL 32303

2024 AUG 13 AM 9:51

FILED

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

RED Transport LLC
(Name of limited liability company)

Florida
(Jurisdiction of its organization)

12/27/2022
(Date registered with Florida Department of State)


H22000019199
(Florida Document Number)

2024 AUG 13 AM 9:51
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This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.


(Signature of authorized representative)

RUBEN A ESQUIVEL PORRO
(Typed or printed name of signee)



Terms and Conditions (Remitter and Payee):

- * Please keep this copy for your record of the transaction
- * The laws of a specific state will consider these funds to be "abandoned" if the Cashier's Check is not cashed by a certain time
 - Please cash/deposit this Cashier's Check as soon as possible to prevent this from occurring
 - In most cases, the funds will be considered "abandoned" before the "Void After" Date
- * Placing a Stop Payment on a Cashier's Check
 - Stop Payment can only be placed if the Cashier's Check is lost, stolen, or destroyed
 - We may not re-issue or refund the funds after the stop payment has been placed until 90 days after the original check was issued
- * Please visit a Chase branch to report a lost, stolen, or destroyed Cashier's Check or for any other information about this item

FOR YOUR PROTECTION SAVE THIS COPY

Customer Copy

CASHIER'S CHECK

9547022312

04/10/2024

Valid after 7 years

Remitter: RACHEL MONTERO CABRERA

\$** 25.00 **

Pay To The Order Of: FLORIDA DEPARTMENT OF STATE

Memo: _____
Note: For information only. Comment has no effect on bank's payment.

Drawn by JPMORGAN CHASE BANK, N.A.
NON NEGOTIABLE

FOR DEPOSIT ONLY. WATERMARK ON BACK

CASHIER'S CHECK

HOLD DOCUMENT AT ALL TIMES. WATERMARK ON BACK

282111107 6/20/23 8810004308

ASSET

for RACHEL MONTERO CABRERA

of The FLORIDA DEPARTMENT OF STATE
Of:

TWENTY FIVE DOLLARS AND 00 CENTS

\$ 25.00

Drawn JPMORGAN CHASE BANK, N.A.

Rebecca Griffin

Rebecca Griffin, Chief Administrative Officer

JPMorgan Chase Bank, N.A.

Columbus, OH

Do not write outside this box

Information only. Comment has no effect on bank's payment.

⑈9547022312⑈ ⑆044000037⑆ 758661325⑈

WARNING: DO NOT CASH CHECK WITHOUT
NOTING THE ARTIFICIAL WATERMARK.
HOLD CHECK AT 45 DEGREE ANGLE TO VIEW.



X

DO NOT WRITE / SIGN / STAMP BELOW THIS LINE

DEPOSITORY BANK ENDORSEMENT

005-4500453-4855443755
DEPOSIT ONLY 25.00
04/18/24--01004--015



276376

FOR INFORMATION CONCERNING THIS INSTRUMENT

CONTACT:

JPMORGAN CHASE BANK, N.A.

2797

1-866-833-8134