P0600006432

(R	equestor's Name)	
(A	ddress)	
(Address)		
(Ci	ity/State/Zip/Phone	e #)
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W. S.

COVER LETTER

(Name of Corporation)	
DOCUMENT NUMBER: P0600006432	· · · · · · · · · · · · · · · · · · ·
The enclosed Resignation of Registered Agent for a Corporation and fe	e are submitted for filing
Please return all correspondence concerning this matter to the following	g:
ROBERT VEGA, CPA	
(Name of Person)	
ROBERT VEGA, CPA, P.A.	
(Name of Firm/Company)	
14461 SW 83 RD STREET	
(Address)	
MIAMI, FL 33183	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
ROBERT VEGA, CPA at (305) 283-19	64
(Name of Person) (Area Code & Daytime	Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO: Amendment Section

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, JORGE M. RAAD (Name of Registered Agent)
hereby resigns as Registered Agent for TRANSPORTATION SERVICES PROVIDERS, (Name of Corporation)
P0600006432
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.
HASSETARY STATE OF THE TARKY
(Signature of Resigning Agent)
If signing on behalf of an entity:
TORGE M. RAAD (Typed or Printed Name)
(Typed or Printed Name)
- LALACATAR
PRESIDENT / DIRECTOR (Capacity)

Fee for filing this document:

\$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

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