



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

2017 NOV 10 PM 2:30  
 STATE OF RHODE ISLAND  
 DEPARTMENT OF STATE  
 BUSINESS SERVICES DIVISION

**Certificate of Cancellation**  
 FOREIGN Limited Liability Company  
 → Filing Fee: \$75.00

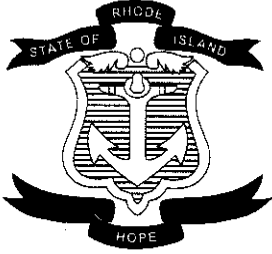
Pursuant to the provisions of RIGL 7-16-53, the undersigned foreign limited liability company hereby cancels its registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. Entity ID Number: 001339742	2. The name of the limited liability company is: TRANSPORTATION TRUCK AND TRAILER SOLUTIONS, LLC
3. It is organized under the laws of: <span style="margin-left: 100px;">Delaware</span>	
4. The entity is not transacting business in this state and surrenders its authority to transact business in this state.	
5. It revokes the authority of its agent, to accept service of process and consents that service of process in any action, suit or proceeding arising out of the transaction of business in the state of Rhode Island, may thereafter be made on the limited liability company by service thereof on the Department of State of the State of Rhode Island.	
6. The post office address to which the Department of State may mail a copy of any process against the limited liability company that may be served on him or her is:  901 Main Avenue, Norwalk CT 06851	
7. As required by RIGL <u>7-16-8</u> , the entity has paid all fees and franchise taxes. RI Division of Taxation's <b>ORIGINAL</b> letter of good standing (LOGS) for the purpose of dissolution <b>MUST</b> accompany this form.	
8. Date when the Cancellation will be effective: <b>CHECK ONLY ONE BOX</b>	
<input checked="" type="checkbox"/> Date received (Upon filing)	
<input type="checkbox"/> Later effective date (Date must be no more than 30 days from the day of filing) _____	
<i>Under penalty of perjury, I declare and affirm that I have examined this Certificate of Cancellation of Registration and that all statements contained herein are true and correct.</i>	
Type or Print Name of Authorized Person Anthony Iannini	Date 8/7/2017
Signature of Authorized Person 	

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**FILED<sup>c</sup>**  
 NOV 10 2017 2:30  
 BY CK 317352

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).



STATE OF RHODE ISLAND AND  
 PROVIDENCE PLANTATIONS  
 DEPARTMENT OF ADMINISTRATION  
 DIVISION OF TAXATION  
 ONE CAPITOL HILL  
 PROVIDENCE, RI 02908

RECEIVED  
 R.I. DEPARTMENT OF STATE  
 2017 NOV 10 PM 2:30

# 13301742

CT CORPORATION SYSTEM  
 450 VETERANS MEMORIAL PKWY STE 7A  
 EAST PROVIDENCE, RI 02914-5315

## LETTER OF GOOD STANDING

It appears from our records that **TRANSPORTATION TRUCK AND TRAILER SOLUTIONS, LLC** has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. **TRANSPORTATION TRUCK AND TRAILER SOLUTIONS, LLC** is in good standing with the Rhode Island Division of Taxation as of **11/09/2017**. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit.

This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or permit may be denied in accordance with R.I. Gen. Laws § 44-20-4.1.

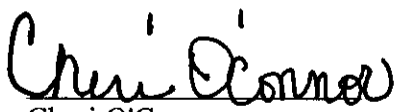
This letter is issued pursuant to the request of the above named corporation for the purpose of:

### CANCELLATION

This letter of good standing is valid only for the specific reason listed above, and is not valid for any other reason(s).

Very truly yours,

  
 Meena Savage  
 Tax Administrator

  
 Cheri O'Connor  
 Supervising Revenue Officer  
 Compliance and Collections

**FILED** C

NOV 10 2017 2:30

BY AK 317352

474603527:12598220  
 DLN: 10000742789



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

November 10, 2017 02:30 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea  
*Secretary of State*

