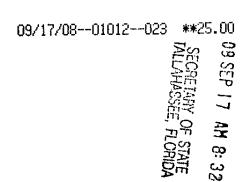
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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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M. THOMAS

SEP 1 8 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: <u>ESPO Entertainme</u> (Name of Foreign L	imited Liability Company)	_
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitted for f	iling.	
Please return all correspondence concerning this matter	r to the following:	
Christopher Esposito (Name of Person)	<u>,</u>	
ESPO Eutertainmeni (Firm/Company)	+ LLC (DBA: Coffee Be	an Bears)
1047 Enclair St. (Address)		
Orlands, FL 32828 (City/State and Zip Code)		OB SEP I
For further information concerning this matter, please of	call:	7 AH 8: 32 SY OF STATE SEE, FLORIDA
hristopher Esposito (Namo of Person)	at (401)509-1690) 기사 기사 기사 기사 기사 기사
(Name of Person)	(Area Code & Daytime Telephone Number)	&
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
	55 Filing Fee & \$\ \$\ \$\\$\$ \$\$ \$\$ \$\$ \$\$ Filing Fee, \$\$ \$\$ Certificate of Status & \$\$ \$\$ Certified Copy \$\$	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

ESPO Entertainment LCC (DBA: Coffee Bean Bears)
(Name of limited liability company)

Delaware LLC Operation in the State of Fl. (Jurisdiction of its organization)	
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.	
This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.	
/by7 Enclasy St. (Mailing address)	
Orland, FL 32828 (City/State/Zip)	·
The limited liability company agrees to notify the Department of State in the future of cany change in its mailing address.	
(Signature of member of authorized representative of a member)	∵
Christopher Esposito Managing Member (Typed or printed name of signee)	

Filing Fee: \$25.00