L02000013027

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE OF OF CORPORATIONS

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COVER LETTER

SUBJECT: PALM BIEACH SPIECIALTY COPPISE, LLC (Name of Limited Liability Company)
Dear Sir or Madam:
The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joseff KELLY TID
PALM BISACH SIECIALTY COFFEE LLC
(Firm/Company) 3965 INVESTMENT LANE (Address)
Wrost Palm Bizach, FL. 33404 City/State and Zip Code)
For further information concerning this matter, please call:
Tosigna Kaluy at (56) 881-0803 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25 Filing Fee CR2E079 (8/05)

STREET/COURIER ADDRESS:

Registration Section

Clifton Building

Division of Corporations

2661_Executive Center Circle

Tallahassee, Florida 32301

Registration Section

Division of Corporations

TO:

\$55 Filing Fee & Certified Copy

MAILING ADDRESS:

Tallahassee, Florida 32314

Registration Section Division of Corporations

P.O. Box 6327



October 31, 2006

JOSEPH P KELLY III PALM BEACH SPECIALTY COFFEE LLC 3965 INVESTMENT LANE WEST PALM BEACH, FL 33404

SUBJECT: PALM BEACH SPECIALTY COFFEE LLC

Ref. Number: L02000013027

We have received your document for PALM BEACH SPECIALTY COFFEE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Can't use letter sent need to complete form

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

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Letter Number: 906A00064375



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, JOHN A. GRAVANTE, hereby resign as MENURISK (Title)

of ALM BEACH SPECIALTY CO12121EE LLC,

(Limited Liability Company)

a limited liability company organized under the laws of the State of FLORINA,

and affirm that the limited liability company has been notified in writing of the resignation.

(Signature of resigning manager, managing member or member)

FILING FEE IS \$25.00

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

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