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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Ві	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
(2) No		
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> SECRETARY OF STATE LLAHASSEE, FLORIDA

2007 DEC 24 PH 5: 45

COVER LETTER

SUBJECT: PRIVATE ESTATE ROASTERS, LLC (Name of Limited Liability Company) The analoged member managing member or manager regionation and fac(s) are submitted for
The analysis of mamber, managing member or manager regionstion and fac(s) are submitted for
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
DAVID E. HARDIN (Contact Person)
PRIVATE ESTATE ROASTERS, LLC (Firm/Company)
PO BOX 3891 (Address)
DELAND FL 32721-3691 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Contact Person) at (380) 892-4097 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 CR2E079 (5/06) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	e limited liability company a	* -		-	nent
	bility company was organize エロス		:		
	cument/registration number o		ty company is:		
	HY W. ROSE Name of Person Resigning) ability company and affirm triting.				
	signing Member, Managing	Member or Manager	_ r		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		IACLAO,	2007 DEC	