(Address) (Address) (City/State/Zip/Phone #) PICK-UP				
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SECRETARY OF STATE DIVISION OF CORPORATIONS

J. BRYAN

JAN 1 5 2008

EXAMINER

CR2E079 (5/06)

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Restaurant Group of D	Destin L.L.C.	
The enclosed member, managing member or filing.	r manager resignation and fee(s) are submitted for	
Please return all correspondence concerning	g this matter to:	
Michael Roberts		
(Contact Person)		
Restaurant Group of Destin LLC	JAN JAN	22
(Finn Company)		
1096 Scenic Gulf Dr. Suite C-102	<u>2</u>	종유(영상
(Address) Miramar Beach, FL 32550	08 JAN 14 PM 3: 46	RATIONS
(City/State and Zip Codo)		
For further information concerning this matter	tor, please call:	
Paul E Roberts	ы <u>850</u> 837-9834	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to \$25 Filing Fee	to the Florida Department of State for: \$55 Filing Fee & Certified Copy	
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 Tallahassec, Florida 32314	

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	staurant Group of De		s of the Florida Department
2. This limited liab	ility company was organized	under the laws of:	
3. The Florida doc L0600002	ument/registration number of	f this limited liability cor	mpany is:
4. I, Michael R	oberts	, hereby resign as a	Managing Member
Print N	tume of Person Resigning)		(Print Title)
resignation in wa	bility company and affirm the		ny has been nolitied of my
			. 80 SEATO
Filing Fee:	\$25.00 (Required)		i CR
Certified Copy:	\$30.00 (Optional)		SECRETAR BIVISION OF C
			D SOC
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			PH 3: 46
CR2B079 (5/06)			o DEE