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S. HAWKES

MAY 2 7 2009

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: COFFEE ROASTERS OF FRORIDA, LLC (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
DAVID SCOTT KENNEDY (Contact Person)
(Contact Person)
(Firm/Company) 4819 WETHERSFIELD PL W
(Address)
JACKSONVILLE, FL 3225) (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) (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 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)

TO: Registration Section



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the	limited liability company as COFFEE ROASTERS	it appears on the record	s of the Florida Department
of State is:	201102 0 17/01/2		
2. This limited liab	ility company was organized	under the laws of:	
	ument/registration number of	this limited liability co	mpany is:
4. I, DAV I'D	S COTT KENNEDY Came of Person Resigning)	hereby resign as a	n MGR (Print Title)
of this limited lial resignation in wr	bility company and affirm the iting.	e limited liability compa	any has been notified of my
Da	ist Soft Ken	-dy	
Signature of Resi	igning Member, Managing M	lember or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		•
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