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T. BROWN

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: J HARRELL ENTERPRISES

(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:

MARIA HARRELL

(Contact Person)

EDIBLE ARRANGEMENTS

(Firm/Company)

2480 N HERITAGE OAKS PATH

(Address)

HERNANDO, FL 34442

(City/State and Zip Code)

For further information concerning this matter, please call:

MARIA HARRELL

352 、256-7

(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

\$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 Tallahassee, Florida 32314

CR2E079 (5/06)





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as i	• •	of the Florida Department
2. This limited liab	oility company was organized	under the laws of:	
3. The Florida doc L070000753	ument/registration number of	this limited liability com	pany is:
4. I, JESSICA	COOK	, hereby resign as a _	MGRM
·	iame of Person Resigning)		(Print Title)
resignation in wr	bility company and affirm the iting. Ca COOK igning Member, Managing Member		y has been notified of my
O	\$25.00 (Required)	emoer or ivianager	