2003 LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # M9800000369

TORREFAZIONE ITALIA LLC



Principal Place of Business C/O SEATTLE COFFEE COMPANY

SIX CONCOURSE PARKWAY. SUITE 1700 ATLANTA GA 30328

Mailing Address

C/O SEATTLE COFFEE COMPANY P.O BOX BHOOL SAN ANTONIO TX 78201

Suite, Apt. #, etc.

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

FILED

04-22-2003 90181 004 ****50.00

Apr 22, 2003 8:00 am Secretary of State

☐ CHECK HERE IF MAKING CHANGES

7. Name and Address of New Registered Agent

City & State City & State 4. FEI Number 91-1895026 Country Zip Country 5. Certificate of Status Desired

\$5.00 Additional Fee Required

Applied For

Not Applicable

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

		Make Check Payable Due E	to Florida Dep By May 1, 2003				
9.	MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MBR SEATTLE COFFEE COMPANY SIX CONCOURSE PARKWAY, SUITI ATLANTA GA 30328	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.