P02000044370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ghost Augustine Tavern & Coffeehouse, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P02000044370

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Louise Cox
(Name of Person)

Ghost Augustine Tavern & Coffeehouse, Inc.
(Name of Firm/Company)

16 A Castillo Drive
(Address)

St. Augustine, FL 32084
(City/State and Zip Code)

For further information concerning this matter, please call:

Louise Cox at (352) 428-4527
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for $35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Carl Jonas Brihammar, hereby resign as President & C.E.O. & Treasurer & Secretary
(Title)

of Ghost Augustine Tavern & Coffeehouse, Inc.
(Name of Corporation)

P02000044370, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

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TALLAHASSEE, FLORIDA

(Signature of resigning officer/director)

FILING FEE IS $35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314