P98000076160

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Eddiness Entity (Varie)
(Danish New La)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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7-29-05 RS

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Blue Mountain Coffee, INC. (Name of Corporation)	_		
DOCUMENT NUMBER: P9 80000 76160	-		
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for	r filing	;.	
Please return all correspondence concerning this matter to the following:			
Christine J. Pendleton (Name of Person)			
Southeast Accounting ? 12x Services, INC.	SECT ALLA	. 50 50	
713 East Atlantic Blud. (Address)	HASSEE	JUL 29	
Pompano Blach, TL 33060 (City/State and Zip Code)	OF STAT	AM 8: 1	ED
For further information concerning this matter, please call:	⊃m	0	
Christine J. Pendleton at (954) 941-7328 (Name of Person) (Area Code & Daytime Telephone Number)	-		

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, <u>Christine J. Pendleton</u> (Name of Registered Agent)	
hereby resigns as Registered Agent for Blue Mountain Coffee, INC. (Name of Corporation)	
P98000 76160 (Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known address.	
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.	
Christine Pendliton (Signature of Resigning Agent) STATE ST	<u> </u>
If signing on behalf of an entity:	LED
(Typed or Printed Name)	
(Capacity)	

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314