N16000011142

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





900292299469

12/16/16--01004--001 **10.00

11/28/16--01033--018 **25.00

SECRETARY OF STATE

DEC 1 5 2015

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: CAAZY RESCUE LAMES NO. (Name of Corporation)			
DOCUMENT NUMBER: N/600001142			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
ATHEEN LERRY (Name of Person)			
CRAZY REScue LAMES INC. (Name of Firm/Company)			
7560 POLKAVE 3223 RIVIERA DR			
PEMBROKE PINES A 33024 CORAL GABLES, FL (City/State and Zip Code) 33134			
For further information concerning this matter, please call:			
ATHUEN ERRY at (305) 448-4474 (Name of Person) at (305) 448-4474 (Area Code & Daytime Telephone Number)			
Enclosed is a check for \$35.00 made payable to the Florida Department of State. \$25.00 ALREADY ON FILE, HOSTED 11/29/16.			

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

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

RECEIVED

16 DEC 12 PH 4: 55

OVERNI OF ENGINEERS

TALLAND CENTRALIBUS



December 2, 2016

AIMEE J LONCZAR 7560 POLK AVE PEMBROKE PINES, FL 33024

SUBJECT: CRAZY RESCUE LADIES,INC. Ref. Number: N16000001142

We have received your document for CRAZY RESCUE LADIES,INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you sent in is not correct.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 616A00025691

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, HATHLEEN TERRY, hereby resign as	REASURER		
of CRAZY RESCUE LAMES /NC	(Title)		
(Name of Corporation) Name of Corporation) Occurrent Number, if known)	e laws of the State of		
HORISA.			
(Signature of resigning officer/director)	Ao M		
FILING FEE IS \$35.00	MIN DEC 13 P 2: SECRETARY OF STA		
Make checks payable to Florida Department of State and mail to:			

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