

PO1000029377

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

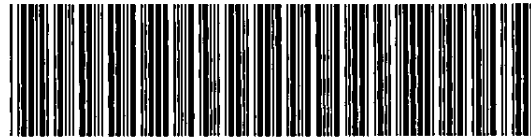
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEP 21 2012
T. ROBERTS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bare Bones Fish & Steakhouse Inc
(Name of Corporation)

DOCUMENT NUMBER: P01000029377

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

Please return all correspondence concerning this matter to the following:

Thomas A McEachern III

(Name of Person)

c/o Seabaugh and Associates LLC

(Name of Firm/Company)

3663 Commercial Way

(Address)

Spring Hill FL 34606

(City/State and Zip Code)

For further information concerning this matter, please call:

Jeanmarie Seabaugh

(Name of Person)

at (352) 596-1022

(Area Code & Daytime Telephone Number)

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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

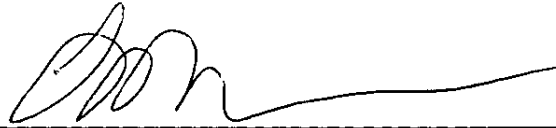
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

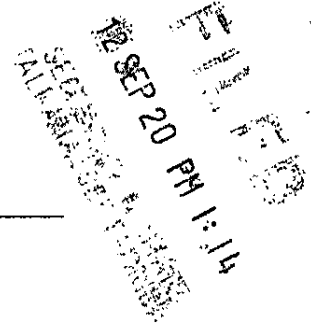
I, Thomas A McEachern III, hereby resign as President
(Title)

of Bare Bones Fish & Steakhouse Inc .
(Name of Corporation)

P01000029377, a corporation organized under the laws of the State of
(Document Number, if known)

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