

PO3000141526

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 APR 12 PM 1:34

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CRAB Shuttle INC.
(Name of Corporation)

DOCUMENT NUMBER: 20-0428529

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

Please return all correspondence concerning this matter to the following:

LINDA J. LUNSFORD
(Name of Person)

CRAB Shuttle INC.
(Name of Firm/Company)

1570 W. CORAL CT.
(Address)

MERRITT ISLAND, FL 32952
(City/State and Zip Code)

For further information concerning this matter, please call:

LINDA LUNSFORD at (321) 745-2325
(Name of Person) (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



Hopefully you can help
me, I need something
showing I am off of this
Corp.

I resigned back in May
of 2004, but didn't know I
had to go through the state.

Just goes to show you,
some TAX people don't know
what they are talking about. L.O.L.

Hope I filled this paper out
right.

Please call me if I have to
do anything else.

Thank you.

Linda Hemford

(H) 321-745-2325

(C) 571-436-0759

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
2007 APR 12 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, LINDA LUNSFORD, hereby resign as PRES.
(Title)

of CRAB Shuttle, INC.
(Name of Corporation)

P03000141526, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Linda Lunsford
(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