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COVER LETTER

TO:	Amendment Section
	Division of Corporations

SUBJECT: BLACKWATER PYRATES CREW, INC.

(Name of Corporation)

DOCUMENT NUMBER: PO7000115620

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

Please return all correspondence concerning this matter to the following:

ELL, S TVART
(Name of Person)

BLACKWATER PURATES CREW INC.
(Name of Firm/Rompany)

5154 WILLING 5T

(City/State and Zip Code)

For further information concerning this matter, please call:

FLLIS STUART at (850) 675-1252 (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, <u>£</u>	LLIS STUAL	, hereb	y resign as	TREASU (Title)	RER	
of	BLACK WATE	A PYRA 7E 5 (Name of Corporation)	CREW	INC.	······································	
^	7000115620 (Document Number, if known)	, a corporation o			nte of	
	FLORIDA	····································				
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	\mathcal{G}	0. 1.			PH 3: N OF SI SEE, FLC)
		(Signature of resigning	g officer/director)		ATE ORID	

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