

P08 0000012083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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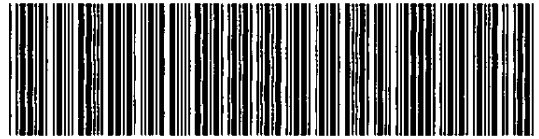
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 SEP 21 AM 11:10

T. Roberts SEP 22 2009

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Crabby's Bayside Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** 008000012083

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

Please return all correspondence concerning this matter to the following:

Valerie Loder

(Name of Person)

Crabby's Bayside Inc

(Name of Firm/Company)

5055 Oaklawn Lane

(Address)

Madeira Beach , FL 33708

(City/State and Zip Code)

For further information concerning this matter, please call:

Valerie Loder

(Name of Person)

at ( 727 ) 320-2434

(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**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 SEP 21 AM 11:10

I, Valerie Loder, hereby resign as Director  
(Title)

of Crabby's Bayside Inc  
(Name of Corporation)

P08000012083, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Valerie C Loder 9/17/09  
(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