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(Re	equestor's Name)	
(Address)		
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bı	ısiness Entity Nar	ne)
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Certified Copies	_ Certificates	s of Status
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R. WHITE

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Crazy Bee Man of Palm Beach Inc		
(Name of Corporation)		
DOCUMENT NUMBER:		
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing		
Please return all correspondence concerning this matter to the following:		
Madhu Sethi		
(Name of Person)		
Crazy Bee Man of Palm Beach Inc		
(Name of Firm/Company)		
22423 Overture Circle		
(Address)		
Boca Raton, Florida 33428		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Madhu Sethi at (561) 207-0859 (Name of Person) (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		

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

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

(Title)	_{ı.} Madnu Setni	hereby resign as President	
Crazy Bee Man of Palm Beach Inc. (Document Number, if known), a corporation organized under the laws of the State of	77	(Title)	
Crazy Bee Man of Palm Beach Inc. (Document Number, if known), a corporation organized under the laws of the State of	_{of} Crazy Bee Man of Pa	lm Beach Inc.	
(Document Number, if known), a corporation organized under the laws of the State of	(Name of Co	orporation)	
Florida	, a	corporation organized under the laws of the State of	
	Florida		
	,	ture of resigning officer/director)	

Make checks payable to Florida Department of State and mail to:

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