F16000001544

(Requestor's Name)			
(Address)			
(Address)			
(7.001653)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





600414993226

09/01/23--01021--020 **87.50

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUB.	CREATIVE LEARNING CORPORATION DELAWARE JECT:	
	(Name of Corporation)	
DOC	UMENT NUMBER: F16000001544	
The e	enclosed Resignation of Registered Agent for a Corporation and fee are submitted for fil	ing.
Pleas	te return all correspondence concerning this matter to the following:	
MIKE	ELKIN	
	(Name of Person)	
CREZ	ATIVE LEARNING CORPORATION DELAWARE	
	(Name of Firm/Company)	
14 Ki	NGS HIGHWAY WEST	
	(Address)	
JACK	SONVILLE, FL 32246 US	
	(City/State and Zip Code)	
For f	urther information concerning this matter, please call:	
МІКІ	FELKIN 9(4 343-6329 at ()	
	(Name of Person) (Area Code & Daytime Telephone Number)	

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E046 (12/19)

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60	77.0503(2), 617.0502(2), 607.1509, or 617.1509.		
Florida Statutes, the undersigned. JENNIE MORRIS			
	(Name of Registered Agent)		
hereby resigns as Registered Agent for	CREATIVE LEARNING CORPORATION DELAWARE		
merooy rounging the regions and regions are 1	(Name of Corporation)		
F16000001544			
(Document Number, it known)	_		
A copy of this resignation was mailed to	the above fisted corporation at its last known address.		
this statement is filed.	discontinued on the 31st day after the date on which		
If signing on behalf of an entity:			
CREATIVE LEARNING	CORPORATION DELAWARE		
(Typed or Printed Name)		
BOOKKEEPER			
 	(Capacity)		

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

CR2F046 (12.19)