P810/00/11

(Re	equestor's Name)			
(Address)				
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COVER LETTER

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Division of Corporations	
SUBJECT: Juls Learning Center	
	ed Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning t	his matter to:
Juliet Akagbosu	
(Contact Person)	
Juls Learning Center	
(Firm/Company)	
7480 NW 13th Court	
(Address)	
Plantation, FL 33313	
(City/State and Zip Code)	
For further information concerning this matter	r, please call:
Juliet Akagbosu	at (_954) 4654560
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)

TO: Registration Section



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as s Learning Center	s it appears on the records of the	he Florida Department
2. This limited liab	oility company was organized	d under the laws of:	
3. The Florida doc <u>L1100010</u>	-	f this limited liability company	y ïs:
4. I, Sharon So	ott	, hereby resign as a MC	SRM
•	lame of Person Resigning) bility company and affirm th	ne limited liability company ha	(Print Title)
Signature of Res	oud Carbon. igning Member Managing N	(MG-R). Member or Manager	11 DEC
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		DEC 19 AN THE TARY OF AHASSEE.