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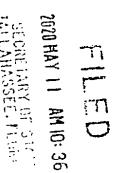
(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
, ,				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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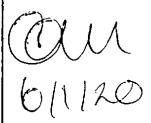
Office Use Only



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COVER LETTER

Division of Corporati	ons		
Golden Gate Prepa SUBJECT:	ratory Academy		
30b.1.c 1.	npany)		
The enclosed member, resign	ation or dissociation	on and fee(s	s) are submitted for filing.
Please return all corresponde	nce concerning this	matter to:	
Cameal Carlton			
(Contact	Person)		
Golden Gate Preparatory			
(Firm/Co	mpany)		
3757 Hampton Hills Drive			
(Addr)	288)		_
Lakeland, FL 33810			
(City/State a	nd Zip Code)		
For further information conce	erning this matter, p	please call:	
Cameal Carlton	at	863	670-2569
(Name of Contact Pe		·	& Daytime Telephone Number)
Enclosed please find a check ☐ \$25 Filing Fee	_ ·		Department of State for: g Fee & Certified Copy
Mailing Address: Registration Section Division of Corporati P.O. Box 6327 Tallahassee, FL 32314		_	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303



FILED 2020 MAY II AM 10: 36 SECRETARY OF STATE FALLAHASSEE. FLORE

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as DEN GATE PREPARATORY AC	it appears on the records of the Florida Department ADEMY, LLC
of State is:		, , , , , , , , , , , , , , , , , , ,
2. The Florida doci	ument/registration number as:	signed to this limited liability company is:
3. The date this me	ember/manager withdrew/resi	gned or will withdraw/resign is: 4/07/2020
4. I. ANTIONETTE WILCOX (Print Name of Person Resigning)		, hereby withdraw/resign as a
(Print N	lame of Person Resigning)	
ADMINISTRAT	IVE PRINCIPAL	
	(Print Title)	
of this limited lia resignation in wr		e limited liability company has been notified of my
Melion	Tel Miller	-
Signature of Di	issociating Member or Resign	ning Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	