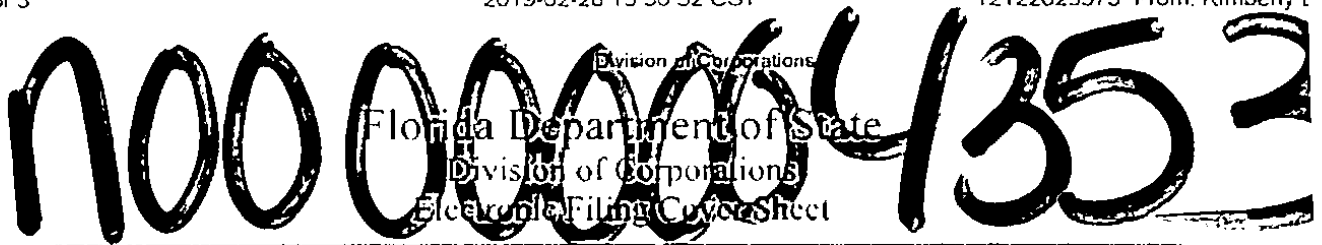


2/26/2019



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000065649 3)))



H190000656493ABC7

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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TALLAHASSEE, FL

REGISTERED AGENT RESIGNATION YMCA CHILDREN'S SERVICES, INC.

Certificate of Status	0
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2019 FEB 26 A 9 48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FEB 27 2019
T. LEMIEUX

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, NRAI SERVICES, INC.

(Name of Registered Agent)

hereby resigns as Registered Agent for YMCA CHILDREN'S SERVICES, INC.

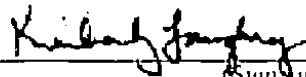
(Name of Corporation)

N00000004353

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which
this statement is filed.



(Signature of Resigning Agent)

If signing on behalf of an entity:

NRAI SERVICES, INC.- Kimberly Laughrey

(Typed or Printed Name)

ASSISTANT SECRETARY

(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withdrawn corporation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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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