# N03000006573

	Requestor's Name)	
<del>~ (</del>	Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
	(Business Entity Name)	
(Document Number)		
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RA Resign

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JQ 09/23/20

### COVER LETTER . . .

(Name of Person)	(Area C	Code & Daytime Telephone Number)	
EVELYN TUKES	904 at (	445-9588	
For further information concerning this n	natter, please ca	all:	
(City/State and Zip Code	e)		
JACKSWONVILLE, FL 32209			
(Address)			
4751 WALGREEN ROAD			
(Name of Firm/Compan	y)	— <del></del>	
SCHOOL FOR ACCELERATED LEARNING		OGIE	
(Name of Person)			
EVELYN TUKES		· <del></del>	
Please return all correspondence concern	ning this matter	to the following:	
The enclosed Resignation of Registered	Agent for a Cor	rporation and fee are submitted for fi	ling.
DOCUMENT NUMBER: N03000006573	<del></del>		
	(Name of Corp	poration)	
SUBJECT: SCHOOL FOR ACCELERATED	LEARNING AND	D TECHNOLOGIES, INC.	
Division of Corporations			

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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:

**TO:** Amendment Section

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

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections	607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, EVI	ELYNTUKES
	(Name of Registered Agent)
hereby resigns as Registered Agent for	SSCHOOL FOR ACCELERATED LEARNING AND TECHNO!
, , , , , , , , , , , , , , , , , , , ,	(Name of Corporation)
N03000006573	
(Document Number, if known)	<del>_</del>
A copy of this resignation was mailed	to the above listed corporation at its last known address.
The agency is terminated and the offic this statement is filed.	e discontinued on the 31st day after the date on which
-Enelys	Signature of Resigning Agent)
If signing on behalf of an entity:	
SCHOOL FOR ACCELE	ERATED LEARNING AND TECHNOLOGIES, IN
	(Typed or Printed Name)
REGISTERED AGENT	
	(Capacity)
\$87.50 - Ac \$35.00 - Ad	ng this document: tive Corporation ministratively dissolved/voluntarily dissolved/s thdrawn corporation

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