N04000004193

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Amendment Section Division of Corporations

TO:

SUBJECT:	Maria	Konopnic		Saturday		School,	Inc		
- - -		(Name of Corporation)							
DOCUMENT	OCUMENT NUMBER: N0400004193								
The enclosed C	fficer/Dire	ctor Resignat	ion for	a Corporation	and fee are	submitted fo	or filing.		
Please return all correspondence concerning this matter to the following:									
Krystyna Supinski (Registered Agent)									
(Name of Person)									
Maria Konopnicka's Saturday Polish School, Inc.									
(Name of Firm/Company)									
25 Lansdowne Ln.									
		(Address)							
Palm Coast, FL 32137									
	(City/St	ate and Zip Co	ode)			,			
For further information concerning this matter, please call:									
Krystyna Supinski									
at (386) 7930072 (Name of Person) (Area Code & Daytime Telephone Number)									
	(Name of P	erson)		(Area Code	& Daytime	Telephone N	umber)		
Enclosed is a check for \$35.00 made payable to the Florida Department of State.									
Street Address Amendment Se Division of Cor Clifton Building 2661 Executive Tallahassee, FL	ction porations g Center Cir	Ā D P	mendm ivision ost Offi	Address: ent Section of Corporation ce Box 6327 ee, FL 32314	S	·			



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 17, 2006

KRYSTYNA SUPINSKI MARIA KONOPNICKA'S SATURDAY POLISH 25 LANSDOWNE LANE PALM COAST, FL 32137

SUBJECT: MARIA KONOPNICKA'S SATURDAY POLISH SCHOOL, INC.

Ref. Number: N04000004193

The fee to resign as officer/director for a corporation is \$35 per person resigning.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis Document Specialist Supervisor

Letter Number: 206A00034859

NECEIVED

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



$_{ m L}$ Dorota Koszyk-Wielgus	, hereby resign as	Trustee
		. (Title)
of Maria Konopnicka's Satur (Name of Corpo	ration)	
N0400004193 a cor (Document Number, if known)	poration organized und	er the laws of the State of eggs
Florida		
	. 2	MAY 1 5 2006
Donde Rose	fr Wiely	biwi I O copp

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassea, Florida 32314