1/05000/0785

(Requestor's Name)			
(Address)			
(Ac	ldress)	, <u>, ,</u>	
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Bu	ısiness Entity Naı	me)	
(Document Number)			
Certified Copies	_ Certificate	s of Status	
Special Instructions to Filing Officer:			
		•	





300099808603

05/02/07--01043--001 **105.00

to Ret

O7 MAY -2 PH 3: 28
SECRETARY OF STATE

COVER LETTER

FINANCIAL FREEDOM EDUCATIONAL SERVICES INC. (Name of Corporation) N05000010785 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Daniel Lichtenberger (Name of Person) Financial Freedom Educational Services, Inc. (Name of Firm/Company) 3661 W. Oakland Park Blvd, Suite 307 (Address) Lauderdale Lakes, FL 33311 (City/State and Zip Code) For further information concerning this matter, please call: Daniel Lichtenberger (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Street Address:** Mailing Address: Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building Post Office Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	, hereby resign as_	President and Director (Title)
N05000010785	Corporation)	der the laws of the State of
Florida		
(Sign	ature of resigning of ficer/direct	T TANK
FIL	ING FEE IS \$35.00	ARY OF STATASSEE. FLORI

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

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