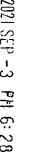
N0800000126H

(Re	equestor's Name)	
	d alva a w	
(Ac	ddress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nam	ne)
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(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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SEP 1 5 2021 I ALBRITTON

TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
SUBJ	JECT:CHILDREN OF THE SUN ACADEMY, INC.
	(Name of Corporation)
DOC	UMENT NUMBER: N08000001264
The er	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
	M. Rogero
	(Name of Person)
David i	M. Rogero, P.A.
	(Name of Firm/Company)
2625 Pe	once de Leon Boulevard, Suite 280
	(Address)
Corał C	Gables, FL 33134
•	(City/State and Zip Code)
For fur	ther information concerning this matter, please call:
Mayra I	Perez 954 732-8661
	(Name of Person) at (732-8661 (Area Code & Daytime Telephone Number)
Enclose	ed is a check for \$35.00 made payable to the Florida Department of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1. 32314 Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	RA PEREZ Director and Officer , hereby resign as (Title)	
	(Title)	
CHILDREN OF THE SUN ACADE	MY, INC.	
(1	Same of Corporation)	
N08000001264		
(Document Number, if known)	a corporation organized under the laws of the State of	
Florida		
Mayra	(Signature of resigning officer/director) 721 721 73 74 75 76 77 78 79 70 70 70 70 70 70 70 70 70	

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 Tallahassec, Florida 32314