

N10000008235

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

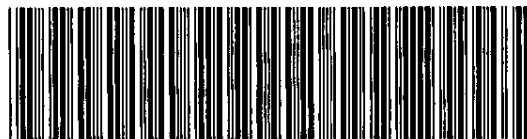
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
14 DEC 10 PM 3:24

DEC 16 2014  
T. CARTER

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Director Resignation  
(Name of Corporation)

**DOCUMENT NUMBER:** N10000008235

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Concepcion Borjas  
(Name of Person)

Breaking Boundaries Inc.  
(Name of Firm/Company)

15316 Markham Dr  
(Address)

dumont, Fl. 34714  
(City/State and Zip Code)

For further information concerning this matter, please call:

Concepcion Borjas at (407) 616 1775  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed 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, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 DEC 10 PM 3:24

I, Concepcion Borjas, hereby resign as Director  
(Title)

of Breaking Boundaries Inc  
(Name of Corporation)

N10000008235, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

**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  
Tallahassee, Florida 32314