N11000006822

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STATE

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TRANSMITTAL LETTER

Classical Preparatory, Inc.

SUBJECT:

N11000008822 Corporation)

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:

Anne Corcoran

(Name of Person)

Corcoran Law Firm, P.A.

(Name of Firm/Company)

3152 Little Rd., Suite 173

(Address)

Trinity, FL 34655

(City/State and Zip Code)

For further information concerning this matter, please call:

Anne Corcoran

(Name of Person)

at (727) 247-3806

(Name of Person)

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

TO:

Amendment Section

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Will Weatherford	Director
	resign as(Title)
Classical Preparatory	, ITIC.
N11000006822 (Name of Corporation)	ganized under the laws of the State of
(Document Number, if known) Florida	5
·	
TATA!	
(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