N1300005824

(Re	questor's Name)				
(Ad	dress)				
(Address)					
(Cit	ry/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					





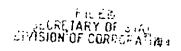
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AUG 07 2018 C MCNAIR

TRANSMITTAL LETTER



27 JUL 30 AM 11: 15

TO: Amendment Section Division of Corporations

SUBJECT:	PARENTS'	RIGHTS OF (CHOICE F	OR KIDS, INC.	
30000001	SUBJECT: PARENTS' RIGHTS OF CHOICE FOR KIDS, INC. (Name of Corporation)				
DOCUMEN	T NUMBER:_	N1300000582	24		
The enclosed	Officer/Directo	or Resignation for	a Corporation	and fee are submitted for filing.	
Please return	all corresponde	nce concerning th	is matter to th	ne following:	
Lee Di	ixon				
	(Name	of Person)			
c/o Ste		racci, P.A.			
	(Name of F	Firm/Company)			
9015 S	trada Ste	ell Ct #102	2		
	(Ac	idress)			
Naples	, FL 341	09			
	(City/State	and Zip Code)			
For further in	iformation conc	erning this matter,	please call:		
Lee Dix	kon	а	,239	263-3587 & Daytime Telephone Number)	
	(Name of Pers	on)	(Area Code	& Daytime Telephone Number)	
Enclosed is a	check for \$35.0	00 made payable to	the Florida l	Department of State.	
Mailing Add Amendment ! Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Division o 2661 Exe	Idress: ent Section of Corporation cutive Center ee, FL 32301		

OFFICER / DIRECTOR RESIGNATION CRETARY OF STAY. FOR A CORPORATION STAYSON OF CORPORATION

2010 JUL 30 AM 11: 15

Secretary
(Title)
R KIDS, INC.
der the laws of the State of

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