

N1500006509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

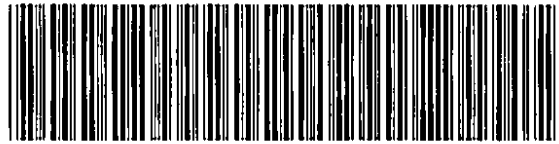
(Business Entity Name)

(Document Number)

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AUG 28 2018

O/D Resign

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Academy School of Excellence

(Name of Corporation)

**DOCUMENT NUMBER:** N15000006509

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

Please return all correspondence concerning this matter to the following:

Simone Rolle

(Name of Person)

Academy School of Excellence

(Name of Firm/Company)

2070 NW 27th Avenue

(Address)

Ft. Lauderdale, Florida 33311

(City/State and Zip Code)

For further information concerning this matter, please call:

Simone Rolloe

(Name of Person)

at ( 954 ) 268-9556

(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**

I, Phyllis Mathis, hereby resign as Vice President  
(Title)

of ACADEMY SCHOOL OF EXCELLENCE, INC.  
(Name of Corporation)

N15000006509, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Phyllis Mathis Digitally signed by Phyllis Mathis  
Date: 2018.07.24 09:06:58 -04'00'  
(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

**FILED**  
**18 AUG 24 PM 1:49**  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA