N16000003006

| (Requestor's Name) | | |
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| (Address) | | |
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| (Address) | | |
| | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| | | |
| (Business Entity Name) | | |
| | | |
| (Document Number) | | |
| | | |
| Certified Copies Certificates of Status | | |
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| Special Instructions to Filing Officer | | |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|---|
| Chance 2 Dance Fhc. SUBJECT: |
| (Name of Corporation) |
| DOCUMENT NUMBER: N160003006 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Denine Christina Esperanca Zaldivar (Name of Person) |
| Chance 2 Darce Inc. (Name of Firm/Company) |
| 264 State Road 436 (Address) |
| Casselberry F1. 32707 City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Denise Christina Esperanca at (407) 608-9748 (Name of Person) Zaldivar (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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| 1. Kyle Kir by | , hereby resign as Chairman of the board (Title) |
|---|--|
| of Chance L Dance Inc. (Name of Corporation | on) |
| (Document Number, if known) | ation organized under the laws of the State of |
| 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