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TRANSMITTAL LETTER

SUBJECT: Living (Learning-Institute (Name of 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:
Charmers V Thompson (Name of Person)
(Name of Firm/Company) 1761 27th St South (Address)
ST Petersburg FL 33712 (City/State and Zip Code)
For further information concerning this matter, please call:
Charmers Thompson at (727) 204 5892 (Name of Person) at (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

* * *

1 Chamers	V. Thome son hereby re	esign as Board	Members/	Directo
Ź	(Name of Corporation)			•
(Document Number, if kno	, a corporation organ	nized under the laws o		
7-101000			WAY 18 PA 4	E MO
	(Signature of resigning of	icer/director)	RDA 19	

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