

P00000004895

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

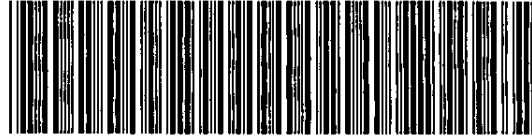
(Business Entity Name)

(Document Number)

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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Educational Child Care Center, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P00000004895

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

Please return all correspondence concerning this matter to the following:

Joyce A Vinson

(Name of Person)

(Name of Firm/Company)

1215 NE 18th Ave

(Address)

Gainesville / FL / 32609

(City/State and Zip Code)

For further information concerning this matter, please call:

Joyce A Vinson

(Name of Person)

at ( 352 ) 494-8179

(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, Keesha N Wynn, hereby resign as President  
(Title)

of Educational Child Care Center, Inc.  
(Name of Corporation)

P00000004895, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Keesha Wynn  
(Signature of resigning officer/director)

15 OCT 22 AM 10:19  
FILED

**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