

P06000003688

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

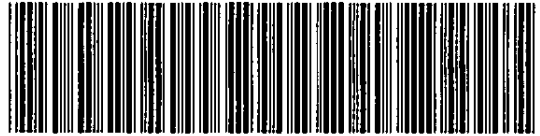
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

60/6/09
7/24/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Advanced Learning Academy, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P 06000003688

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

Please return all correspondence concerning this matter to the following:

Jose A. Cedeno, Jr.
(Name of Person)

Advanced Learning Academy, Inc.
(Name of Firm/Company)

* 14801 Palm Beach Blvd suite 200 *
(Address)

FL. Myers, FL 33905
(City/State and Zip Code)

For further information concerning this matter, please call:

Hope Castelli at (239) 245-3468
(Name of Person) (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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Old Address
was:
1357 N.
Tamiami Trail
N. Ft. Myers,
FL 33903

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Hope E. Castelli, hereby resign as Vice President / Secretary
(Title)
of Advanced Learning Academy, Inc.
(Name of Corporation)
P06000003688, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Hope Castelli
(Signature of resigning officer/director)

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TALLAHASSEE FLORIDA

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