PO60000 73642

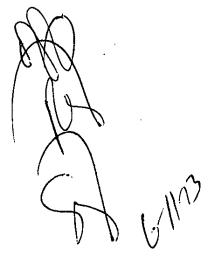
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: (Name of Corporation)
DOCUMENT NUMBER: (Name of Corporation) (Name of Corporation) (Name of Corporation)
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)
Envoro (Name of Person) Envoro (Name of Firm/Company) (Name of Firm/Company)
3)938 US19N -M.
(Address) (Aty/State and Zip Code)
For further information concerning this matter, please call: And Poly (Name of Person) at (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,	DASIMICANOS, hereby resign as prosidut (Title) EDUCAR Prischool of PAM HARBON		- 6
60	(Name of Corporation) (Name of Corporation) (Document Number, if known) (Document Number, if known)		
	(Signature of Jesigning officer/director)	13 JUN -6 AM 9: 26	SECRETARY OF STATE DIVISION OF CORPORATION

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