

PO 800004628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

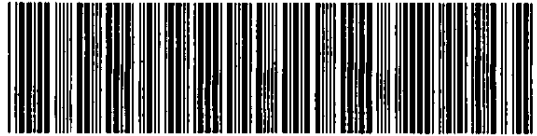
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SECRETARY OF REVENUE
TALLAHASSEE, FLORIDA

2010 APR 28 PM 2:13

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tykes Learning Center, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P08000046298

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

Please return all correspondence concerning this matter to the following:

Patricia M. Gonzalez
(Name of Person)

Tykes Learning Center Inc.
(Name of Firm/Company)

8503 NW 164 St.
(Address)

Miami Lakes, FL 33016
(City/State and Zip Code)

For further information concerning this matter, please call:

Patricia M. Gonzalez at (305) 558-8628.
(Name of Person) (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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Patricia M. Gonzalez, hereby resign as President
(Title)

of Tykes Hearing Center Inc.
(Name of Corporation)

08000046298, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Patricia M. Gonzalez
(Signature of resigning officer/director)

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TALLAHASSEE FLORIDA

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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