

PO800053462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

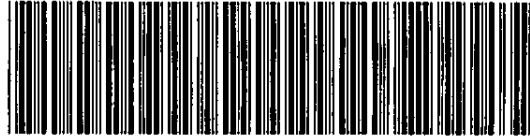
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
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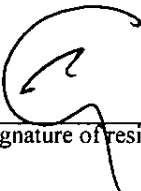
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, EDUARDO MALDONADO, hereby resign as PRESIDENT/DIRECTOR
(Title)

of WONDERLAND LEARNING DAYCARE CENTER, INC.,
(Name of Corporation)

P08000053462, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

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

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