P110000084231

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200259786832

Alse Shation

05/07/14-01024-004 **35.00

PILED

2014 MAY - 7 PM 4: 27

BRILLABASSEE, FLORIBA

180R 5/16/14

TRANSMITTAL LETTER

SUBJECT: The School Store, Inc (Name of Corporation)
DOCUMENT NUMBER: P11 0000 8423
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Barbara S. Lamb (Name of Person)
(Name of Firm/Company)
615 Santander Are #A
Coral Eades, FL 33134 (City/State and Zip Code)
For further information concerning this matter, please call:
Barbara S. Lamb at (305) 790-7354 (Name of Person) at (305) Apytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Amendment Section Division of Corporations

TO:

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FILED

1 . . .

2014 MAY -7 PM 4: 27

Barbara S. Lamb , hereby resign as President (Title)

of the School Stre, Inc (Name of Corporation)

P1100084231 , 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