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(Re	equestor's Name)		
(Ac	ldress)		
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(Ci	ty/State/Zip/Phon	e #)	
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(Ві	usiness Entity Nar	me)	
(Document Number)			
Certified Copies	Certificates	s of Status	
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SECRETARY OF STATE STATE SECRETARY OF SECRETARY OF STATE SECRETARY OF SECR

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COVER LETTER

Division of Corporations
SUBJECT: Proficiency Development Creations, one (Name of Corporation)
DOCUMENT NUMBER: P12600048380
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person)
Proficiency Development Geet in dec. (Name of Arm/Company)
3941 NW 5 DVIJE (Address)
Deekhein Sead 71. 33442 (City/State and Zip Code)
For further information concerning this matter, please call:
Three Compression at (754) 224-1997 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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



April 22, 2013

JAMES G. CAMPIGOTTO PROFICIENCY DEVELOPMENT CREATIONS, INC. 3941 NW 5TH DRIVE DEERFIELD BEACH, FL 33442

SUBJECT: PROFICIENCY DEVELOPMENT CREATIONS, INC.

Ref. Number: P12000068380

We have received your document for PROFICIENCY DEVELOPMENT CREATIONS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as registered agent of an active corporation is \$87.50.

There is a balance due of \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 613A00009554



RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provis	ions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509	Э,
Florida Statutes, the u	(Name of Registered Agent)	
hereby resigns as Reg	istered Agent for Proficiency Development (Namy of Corporation)	Creating do
P1200006	5380	
(Document Number		
A copy of this resigna	tion was mailed to the above listed corporation at its last known a	address.
The agency is termina this statement is filed.	ated and the office discontinued on the 31st day after the date on w	vhich
7	(Signature of Resigning Agent)	
If signing on behalf of	f an entity:	
	(Typed or Printed Name)	
	(Typed of Timed Salite)	
	(Capacity)	SECRETAR SECRETAR 13 MAY -3
	Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation	PH 4: 31

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314