## P22000015694

(Requestor's Name)	
(Address)	_
,	
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
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## TRANSMITTAL LETTER

Division of Corporations ABA 4 SUCCESS, INC. SUBJECT: (Name of Corporation) DOCUMENT NUMBER: P22000015694 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 707 NW Douglas Circle Cape Coral FL 33993 (Name of Person) ABA 4 SUCCESS, INC (Name of Firm/Company) 13180 N. CLEVELAND AVE #135 (Address) NORTH FORT MYERS, FL 33903 (City/State and Zip Code) For further information concerning this matter, please call: Sarahi Suarez Landin (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Mailing Address:** Street Address: Amendment Section **Amendment Section** Division of Corporations **Division of Corporations** The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO:

Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

IDOLIDIA ALVAREZ	vice president, hereby resign as	
	(Title)	
ABA 4 SUCCESS, INC.		
(Nan	ne of Corporation)	
P22000015694	, a corporation organized under the laws of the State of	
(Document Number, if known)		
Florida		
	<del></del> .	
	<b></b>	
	(Signature of resigning officer/director)	
	(Signature of resigning officerative tot)	

## 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