

P23 0000 29515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

(Business Entity Name)

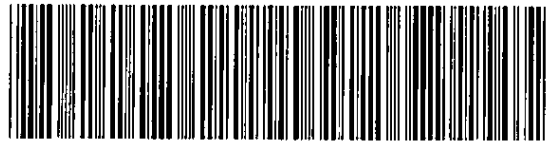
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALL RESOURCES TRAINING CENTER CORPORATION

(Name of Corporation)

DOCUMENT NUMBER: F23000029515

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

Please return all correspondence concerning this matter to the following:

SERGEI KOVALEVSKII

(Name of Person)

ALL RESOURCES TRAINING CENTER CORPORATION

(Name of Firm/Company)

2501 SOUTH OCEAN DR. # PH30

(Address)

HOLLYWOOD, FL 33019

(City/State and Zip Code)

For further information concerning this matter, please call:

OLEH MAKAROV

(Name of Person)

754

6102576

at (

)
(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

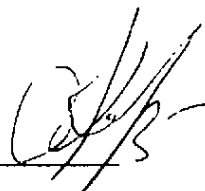
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I, KOVALEVSKII SERGEI, hereby resign as TITLE VP
(Title)

of ALL RESOURCES TRAINING CENTER CORPORATION
(Name of Corporation)

123000029515, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Sergei Kovalevskii 
(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