P94000006703

(Red	questor's Name)			
(Add	iress)			
(Add	iress)			
(City	//State/Zip/Phone	e #)		
_				
PICK-UP	MAIT	MAIL		
(Bus	iness Entity Nar	ne)		
(Doc	cument Number)			
Certified Copies	Certificates	s of Status		
Special Instructions to 5	Tiling Officer	1		
Special Instructions to Filing Officer:				





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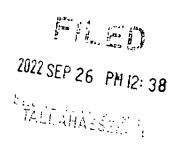
TRANSMITTAL LETTER

DAN COMO ATION INC					
BAR EDUCATION, INC. (Name of Corporation)					
DOCUMENT NUMBER: P94000006703	•				
The enclosed Officer/Director Resignation for a	Corporation	and fee are submitted for filin			
Please return all correspondence concerning this	matter to th	ne following:			
PETER LIPINSKI					
(Name of Person)					
SOUTHEASTERN COLLEGE					
(Name of Firm/Company)					
300 ROYAL COMMERCE ROAD					
(Address)					
ROYAL PALM BEACH, FL 33411					
(City/State and Zip Code)					
For further information concerning this matter, p	lease call:				
JAMES WALDMAN	954	557-6543			
(Name of Person)	(Area Code	557-6543) e & Daytime Telephone Number)			
Enclosed is a check for \$35.00 made payable to t	the Florida I	Department of State.			
, .		•			
Mailing Address:	Street Address:				
Amendment Section	Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327		ntre of Tallahassee			
Tallahassee, FL 32314	2415 N	Monroe Street Suite 810			

Tallahassee, FL 32303

TO: Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



	PETER LIPINSKI	, hereby resign as_	TREASURER
_			(Title)
f	BAR EDUCATION, INC.		
	(Nan	ne of Corporation)	
	P94000006703	, a corporation organized unc	der the laws of the State of
	(Document Number, if known)	cu to portuen organization	the most of the value of
	FLORIDA		
		·	
		the &	
		(Signature of resigning Officer/director	or)

FILING FEE 18 \$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