94000078867

(Requestor's Name)	1
(Address)	
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(Address)	
(City/State/Zip/Phone	#)
PICK-UP WAIT	MAIL
	,
(Business Entity Name	=)
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EXAMINER

COVER LETTER

TO:	Amendment Section Division of Corporations
SUB.	TECT: Education Training Corporation
	(Name of Corporation)
DOC	UMENT NUMBER: P94000078867
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
Dav	id Knobel
	(Name of Person)
Flor	ida Career College
	(Name of Firm/Company)
338	3 North State Road 7
	(Address)
Lau	derdale Lakes, FL 33319
	(City/State and Zip Code)
For fi	orther information concerning this matter, please call:
Davi	d Knobel at (954) 535-8688 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis: Clifto 2661	Mailing Address: Idment Section Idm

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Audrey Kaplan	, hereby resign as	Secretary	
	, , , <u></u>	(Title)	
of Education Training Corporation	1		
	of Corporation)	,	
P94000078867	, 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