

# P22 000015694

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

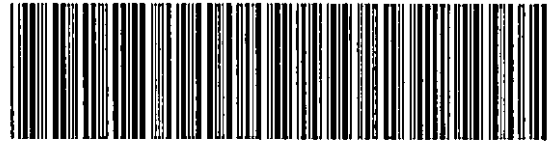
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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*old Resignation*

JAN 19 2023  
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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ABA 4 SUCCESS, INC.  
\_\_\_\_\_  
(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 at (786) 318-4057  
\_\_\_\_\_  
(Name of Person) (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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, IDOLIDIA ALVAREZ, hereby resign as vice president  
(Title)

of ABA 4 SUCCESS, INC.  
(Name of Corporation)

P22000015694, 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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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