F03000004014

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone i	(#)	
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2009 HAR 19 AM 11: 57 SECRETARY OF STATE, TALLAHASSEE, FI OBJE,

off. Resign:

TB 3/20/09

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	JECT: Resignation of Frank Weaver, Secretary
	(Name of Corporation)
DOC	UMENT NUMBER: F03000004014
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
Jani	ce E Weaver, President
	(Name of Person)
ArtF	form lnk, lnc.
	(Name of Firm/Company)
РО	Box 14939
	(Address)
Kno	xville, TN 37914-2139
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
Janio	ce E Weaver at (865) 684-0009 (Name of Person) (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 Divisi Clifto 2661	Mailing Address: Amendment Section Amendment Section Division of Corporations n Building Executive Center Circle Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Frank Weaver	, hereby resign as Secretary/Director	
,	(Title)	_
of_ArtForm Ink, Inc.		
(Nam	e of Corporation)	
F0300004014 (Document Number, if known)	, a corporation organized under the laws of the State of	
Florida	•	
trul	SECRETARY OF STATE (Signature of resigning officer/director) (Signature of resigning officer/director)	FILED FILED

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