

L17000189444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

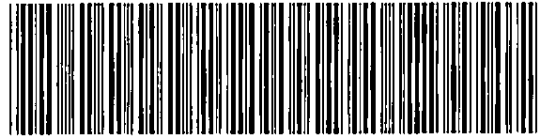
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SECRETARY OF STATE  
CORPORATION  
2023 MAY -2 PM 3:01

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** UNLIMITED PRODUCT SOLUTIONS LLC  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** L17000189444  
\_\_\_\_\_

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

FRANK D WALTER  
\_\_\_\_\_  
(Name of Person)

UNLIMITED PRODUCT SOLUTIONS LLC  
\_\_\_\_\_  
(Name of Firm/Company)

6742 Forrest Hill Blvd. MB#351  
\_\_\_\_\_  
(Address)

Greenacres, FL 33413  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

DIANA WALTER at ( 561- 531-1954 )  
\_\_\_\_\_  
(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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, FRANK WALTER, hereby resign as CEO  
(Title)

of UNLIMITED PRODUCT SOLUTIONS LLC  
(Name of Corporation)

L17000189444, 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

**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**  
**2023 MAY -2 PM 3:01**