

L18000093618

**Florida Department of State
Division of Corporations
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FRAMA POLI LLC**

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**J. LEGGETT
APR 23 2018**

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FRAMA POLI LLC

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SALVATORE SCIASCIA	3705 SHARES PLACE	<input checked="" type="checkbox"/> Add
		SUITE 1	<input type="checkbox"/> Remove
		WEST PALM BEACH, FL 33404	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing

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(b) The 90th day after the record is filed,

Dated APRIL 16th

2018

Signature of a mother or authorized representative of child

VINCENZO POLI

Typed or printed name of applicant