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# TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

The Family Freedom Endeavor, Inc.			
BJECT: (Name of Corporation)			
DOCUMENT NUMBER:			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing			
Please return all correspondence concerning this matter to the following:			
Amanda Melloni-Caracciolo			
(Name of Person)			
(Name of Firm/Company)			
52 Greenock St. (Address)			
Feeding Hills, MA OIGO (City/State and Zip Code)			
For further information concerning this matter, please call:			
Amanda Melloni-Caracciolo at (4/3) 544-2209 (Name of Person) (Area Code & Daytime Telephone Number)			
(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

Amanda Melloni-Caraciollo	Secretary , hereby resign as	
I,	, nereby resign as	(Title)
The Family Freedom Endeavor, Inc.		
(Name	of Corporation)	,
(Document Number, if known)	, a corporation organized under the la	ws of the State of
Florida		
	<u>—</u> ·	2021 Pr
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	Signature of resigning officer/director)	<del></del>
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# **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