## N22000011743

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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Special Instructions to Filing Officer:		
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J. HORNE		
JAN 2 4 2023		
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SECRETARY OF SIX

2022 OCT 24 AM 10: 25





## TRANSMITTAL LETTER

O: Amendment Section Division of Corporations	
UBJECT: Feline Wellness	Foundation (FWF) Inc
OCUMENT NUMBER: N 220000	11743
he enclosed Officer/Director Resignation for	a Corporation and fee are submitted for filing.
lease return all correspondence concerning th	is matter to the following:
PATRICIA A. SAIHM (Name of Person)	
(Name of Person)	<del></del>
Feline Wellness Zoun (Name of Firm/Company)	dation
7812 Passion flow	ERDT
Sarosota FL 34241 (City/State and Zip Code)	<del></del>
or further information concerning this matter	, please call:
PATRICIA A. SAHM a (Name of Person)	(Area Code & Daytime Telephone Number)
nclosed is a check for \$35.00 made payable t	o the Florida Department of State.
Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations
Division of Corporations	211101011 01 001 potaniono

The Centre of Tallahassee

Tallahassec, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

102200724 ED & MID: 25 - 1 Dicate

I, Terri Carpon, hereby resign as Bod Member Dirac
of Feline Wellhoss Francia for (Name of Corporation)
N22020 1743 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