

N220000011743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

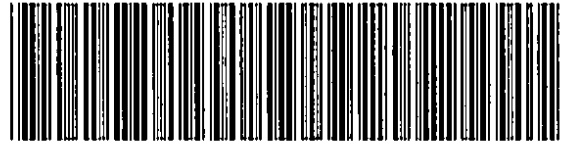
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TALLAHASSEE, FL



## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Feline Wellness Foundation (FWF)  
(Name of Corporation)

**DOCUMENT NUMBER:** NB2000011743

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PATRICIA A. SAHM  
(Name of Person)

Feline Wellness Foundation  
(Name of Firm/Company)

7812 PASSION-FLORIDA DR.  
(Address)

Seaside FL 34241  
(City/State and Zip Code)

For further information concerning this matter, please call:

PATRICIA A. SAHM at (516) 238-6275  
(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**

FILED  
2022 DEC -1 PM 2:32  
SECRETARY OF  
TALLAHASSEE

I, Greg Miller, hereby resign as Director  
(Title)

of Feline Wellness Foundation  
(Name of Corporation)

N 22000011743, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Greg Miller  
(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