

PO4000002323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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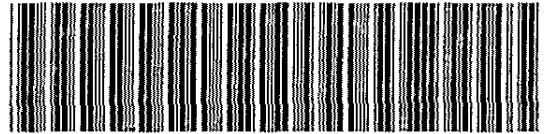
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

501294  
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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FREEDOM DEBT SOLUTIONS  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000002323

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

Please return all correspondence concerning this matter to the following:

Matthew Szafran

(Name of Person)

NationsDebt, Inc.

(Name of Firm/Company)

380 South State Road 434, Suite 1004-319

(Address)

Altamonte Springs FL 32714

(City/State and Zip Code)

For further information concerning this matter, please call:

Matt Szafran

(Name of Person)

at ( 321 ) 6631398  
(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  
409 E. Gaines Street  
Tallahassee, FL 32399

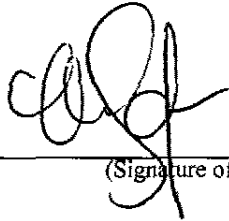
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Matthew Szafran, hereby resign as President  
(Title)

of FREEDOM DEBT SOLUTIONS, INC.  
(Name of Corporation)

P04000002323, 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

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