P040000168341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

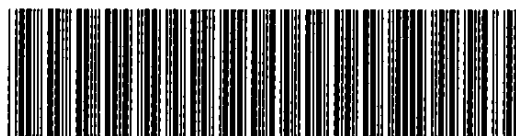☐ PICK-UP   ☐ WAIT   ☐ MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TrueStory Incorporated
(Name of Corporation)

DOCUMENT NUMBER: PO4000168341

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

Please return all correspondence concerning this matter to the following:

Charles L Frampton
(Name of Person)

TrueStory Incorporated
(Name of Firm/Company)

10207 SW 92nd Street
(Address)

Gainesville FL 32608
(City/State and Zip Code)

For further information concerning this matter, please call:

Laurie Rick _____ at (352) 317-1047
(Name of Person) _(Area Code & Daytime Telephone Number)_

Enclosed is a check for $35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, **Charles L Frampton**, hereby resign as **CEO**

(Title)

of **Truestory Incorporated**,

(Name of Corporation)

PO4000168341, 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