

PO9 000000407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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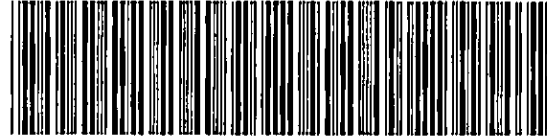
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2019 NOV 12 A 9:54

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REC 11 2019  
NOV 12 2019

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Rebounderz Franchise & Development, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: P09000000407

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

Please return all correspondence concerning this matter to the following:

Melvin Horn  
(Name of Person)

Rebounderz Franchise & Development, Inc  
(Name of Firm/Company)

P.O. Box 952949  
(Address)

Lake Mary FL 32795  
(City/State and Zip Code)

For further information concerning this matter, please call:

Melvin Horn at (407) 221 6025  
(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  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Alford M. Goldman, hereby resign as Title D  
(Title)

of ReSounderz Franchise & Development, Inc.  
(Name of Corporation)

09000000407, 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**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314