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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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TRANSMITTAL LETTER $_{\vec{q}}$.

TO: Amendment Section Division of Corporations
SUBJECT:
(Name of Corporation)
DOCUMENT NUMBER: P19000048979
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Cory Sands
(Name of Person)
Frameworxfl, Inc
(Name of Firm/Company)
7005 55th ST E
(Address)
Ellenton, FL 34222
(City/State and Zip Code)
For further information concerning this matter, please call:
Cory Sands 941 779-7903
Cory Sands at (941 779-7903 (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

I, _	John Sthreshley, hereby resign as CFO (Title)	_
of	Frameworxfl, Inc. (Name of Corporation)	. •
	(Document Number, if known). a corporation organized under the laws of the State of	
	Florida	
	(Signature of resigning officer/director)	<u> </u>
	FILING FEE IS \$35.00	LED @

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

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