

N09 000008148

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

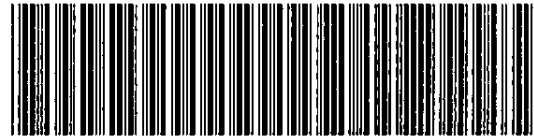
(Business Entity Name)

(Document Number)

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11 JAN 31 PM 3:06  
SECRETARY OF STATE  
ALEXANDRIA, VIRGINIA

0/0

Resign.

2/3/11

DC

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Successive Dreams, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** N09000008148

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

Please return all correspondence concerning this matter to the following:

Amy S Higgins  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

1558 Farmington Avenue  
(Address)

Wellington, FL 33414  
(City/State and Zip Code)

For further information concerning this matter, please call:

Amy Higgins at ( 561 ) 352-1728  
(Name of Person) (Area Code & Daytime Telephone Number)

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

<b><u>Street Address:</u></b>	<b><u>Mailing Address:</u></b>
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
Clifton Building	Post Office Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

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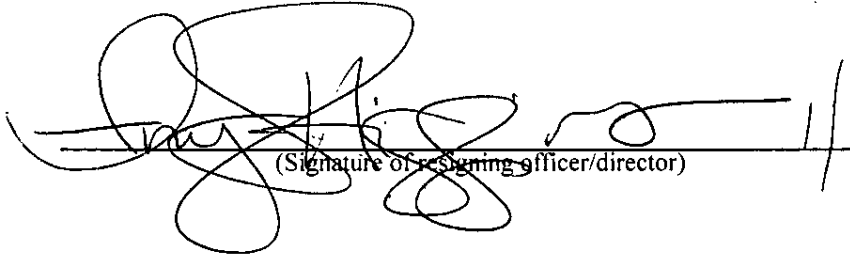
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Amy Sexton-Higgins, hereby resign as Director  
(Title)

of Successive Dreams, Inc  
(Name of Corporation)

ND90000008148, 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

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA