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(Business Entity Name)

(Document Number)

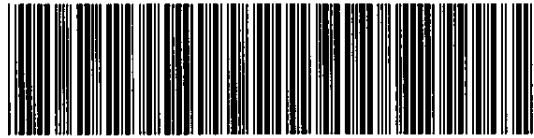
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TALLAHASSEE, FLORIDA

[Handwritten signatures]

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Higher Dimensions Support Services
(Name of Corporation)

DOCUMENT NUMBER: N07000004753

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

Please return all correspondence concerning this matter to the following:

Maryam M. Solola

(Name of Person)

Higher Dimensions Support Services

(Name of Firm/Company)

927 Osprey Drive

(Address)

Melbourne, FL 32940

(City/State and Zip Code)

For further information concerning this matter, please call:

Maryam Solola

(Name of Person)

at (321) 536 8498

(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, Murbe A. Murbe, hereby resign as Director
(Title)

of Higher Dimensions Support Services, Inc.
(Name of Corporation)

N07000004753, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

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