N09000003475

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



400209121724

06/29/11--01012--010 **35.00

TALLAHASSEE FLOADS

Offlesign News 7-1-11

COVER LETTER

TO:	Amendment Section Division of Corporations			
SUB.	JECT: HIGHER LEARNING FOUNDATION INC			
	(Name of Corporation) DOCUMENT NUMBER: N0900003475			
DOC				
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing			
Pleas	e return all correspondence concerning this matter to the following:			
MAF	RIAN WINGATE			
	(Name of Person)			
	(Name of Firm/Company)			
922	30TH CT			
	(Address)			
WE	ST PALM BEACH/FL 33407			
	(City/State and Zip Code)			
For fi	urther information concerning this matter, please call:			
MAR	RIAN WINGATE at (561) 7182104 (Name of Person) (Area Code & Daytime Telephone Number)			
	(Name of Person) (Area Code & Daytime Telephone Number)			
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.			
Amer Divis Clifto 2661	t Address: Independent Section Identify			

TO:

FILED

11 JUN 29 AM 8: 10

SECRETARY OF STATE
JALLAHASSEE FLORIDA

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. MARIAN WINGATE	, hereby resign as SECRETARY
· · · · · · · · · · · · · · · · · · ·	(Title)
of_ HIGHER LEARNING FOUNDA	
(Name	of Corporation)
N0900003475 (Document Number, if known)	_, a corporation organized under the laws of the State of
FLORIDA	_ ·
$\mathcal{M}_{(S)}$	lgnature of resigning office 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