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

Office Use Only



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C. Coulliste MAR 1 6 2005

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DMH Bug Iding Inc. (Name of Corporation)
DOCUMENT NUMBER:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Scre Hidden (Name of Person)
(Name of Firm/Company)
141 Nautica Mile TX. (Address)
Clernont, FL 34711 (City/State and Zip Code)
For further information concerning this matter, please call:
Bare Hidden at (407) 716-4370 (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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I Bara Hidden	, hereby resign as_	Vice President (Title)	
of DMH Building	of Corporation)		>
(Document Number, if known)	_, a corporation organized unc	ler the laws of the State of	
Florida	_	SECRETARY MALAHASSI	F1L1
_ Saya	Hidden ignature of resigning officer/direct	or)	AH 9: I

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