P08000075/67

| (Re | questor's Name) | | | | | |
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| (Ad | dress) | | | | | |
| (Cit | y/State/Zip/Phon | e #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | | |
| (Bu | siness Entity Na | me) | | | | |
| (Document Number) | | | | | | |
| Certified Copies Certificates of Status | | | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



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0/D Resign, 8/6/13

TRANSMITTAL LETTER

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| Division of Corporations |
|---|
| SUBJECT: Highland Oil Inc. (Name of Corporation) |
| DOCUMENT NUMBER: <u>P08000075167</u> |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| KALPANA PRADHAN |
| (Name of Person) |
| |
| (Name of Firm/Company) |
| 111 Tuscany dr. (Midress) |
| |
| Royal Palm Beach Fl. 33411 (City/State and Zip Code) |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| KALPANA PRADHAN at (561) 267 8517 (Name of Person) (Area Code & Daytime Telephone Number) |
| (Name of Person) (Area Code & Daytime Telephone Number) |
| Final aread is a chear for \$25.00 made mariable to the Florida Deventure of State |

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
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I, KALPANA | PRADHAN, ho | reby resign as_ | Secretary | <u></u> |
|---------------|---------------------------------|----------------------|-------------------------|-----------|
| | d Oil Inc (Name of Corporation) | | (Title) | |
| P 08 0000 751 | 67 a corporation | n organized und | der the laws of the Sta | ite of |
| FLORIDA | | | | |
| | | | | |
| | Halpano | i i | lay = | 13 |
| | (Signature of resig | ning officer/directo | or) HI | |
| | | | 17 17 18 18 | |
| | FILING FEE | IS \$35.00 | (4) (2) (4) | N 17 |

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

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

-> Registered agent mistakenly filed my name as a Secretary of the above corporation. I never owned any % share of the above corporation.