P10000007496

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	· · · · · · · · · · · · · · · · · · ·
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800238745248

resignation To RA

08/22/12--01011--012 **87.50

2012 AUG 22 AH IO: 47
SECRETARY OF STATE
AND AHASSEE FLORIDA

8/27/12

COVER LETTER

Division of Corporations	
SUBJECT: High Impact Protection Inc.	
(Name of Corpor	ration)
DOCUMENT NUMBER: P10000007496	
The enclosed Resignation of Registered Agent for a Corpo	oration and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Marcos L. Nieto	
(Name of Person)	_
High Impact Protection Inc. (Name of Firm/Company)	
5135 SW 97th Ct.	
(Address)	
Miami, FL. 33165 (City/State and Zip Code)	
For further information concerning this matter, please call	:
Marcos L. Nieto	9108365
(Name of Person) (Area Co	de & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

RESIGNATION OF REGISTERED AGENT L. FOR A CORPORATION

2012 AUG 22 AM 10: 47

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, 07.6173509 ORIDA
Florida Statutes, the undersigned, Marcos L. Nieto
(Name of Registered Agent)
hereby resigns as Registered Agent for High Impact Protection Inc.
(Name of Corporation)
P1000007496
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.
Marcos L. Nieto (Signature of Resigning Agent)
If signing on behalf of an entity:
(Typed or Printed Name)
(Capacity)

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314