Pg70002023

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP		MAIL
(Bu	usiness Entity Nar	ne)
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Special Instructions to	Filing Officer:	
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	Office Use On	lv.





10/10/03--01029--022 **52.50





TRANSMITTAL LETTER

Florida Department of State Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

x** .

SUBJECT: <u>Higher Visions, Inc. (Document # P97000020023)</u> Articles of Dissolution in accordance with Section 607.1403, Florida Statutes.

Enclosed is an original and one (1) copy of the articles of dissolution and a check for:

☑ \$52.50 Filing Fee Certified Copy & Certificate

f

FROM:

Huberta M. Davis Name (Printed or typed)

P.O. Box 2045 Address

Titusville, FL 32781 City, State, ZIP

407/267-3923 Daytime Telephone Number

ARTICLES OF DISSOLUTION_

FILED 03 OCT 10 PM 3: 28

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation Sublits the following articles of dissolution:

FIRST: The name of the corporation is: <u>HIGHER VISIONS, INC</u>

SECOND: The date dissolution was authorized: October 6, 200 3

THIRD: Adoption of Dissolution (CHECK ONE)

Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

Dissolution was approved by vote of the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)	
Signed this day of October,	2003.
Signature Auborta Devis	
(By the Chairman or Vice Chairman of the Board, President, or other officer)	
HUBERTA DAVLS (Typed or printed name)	
PRESIDENT	