

TRANSMITTAL LETTER

P99000108127

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

SUBJECT:

Higher Dimensions, Inc.

(Proposed corporate name - must include suffix)

500003070905--4

-12/15/99--01050--001

*****87.50 *****87.50

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

\$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM:

Higher Dimensions, Inc.

Name (Printed or typed)

1170 Bayshore Blvd

Address

Pont St. Mire FL 324983

City, State & Zip

561-359-4673

Daytime Telephone number

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

99 DEC 15 AM 9:48

RECEIVED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 DEC 15 AM 9:51

APPROVED
AND
FILED

NOTE: Please provide the original and one copy of the articles.

T. SMITH DEC 15 1999

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:
Higher Dimensions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
1170 Bayshore Blvd. Port St. Lucie Florida 34983

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: **1000**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
Henry Holmes 4185 57th Court Vero Beach, Florida 32967

ARTICLE V INCORPORATOR

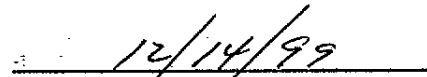
The name and address of the incorporator to these Articles of Incorporation are:
Mary Holmes 4185 57th Court Vero Beach, Florida 32967


Signature/Incorporator


Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Signature/Registered Agent


Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 DEC 15 AM 9:51

APPROVED
AND
FILED