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SECRETARY OF EACH OF CORRESPONDED

C. LEWIS

JAN 2 3 2013

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: QUALITY ALLIANCE USA (Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Mauricio Arroyave		
(Contact Person)		
Quality Alliance USA		
(Firm/Company)		
13076 NW 18 CT		
(Address)		
Pembroke Pines, FL 3	3025	
(City/State and Zip Code)		
For further information concerning this m	atter, please call:	
Mauricio Arroyave	_{at (} 954	9075791
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed please find a check made payab	le to the Florida De	epartment of State for:

STREET/COURIER ADDRESS:

■ \$25 Filing Fee

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Certified Copy

□ \$55 Filing Fee &

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

CR2E079 (5/06)





2013 JAN 22 PM 1: 06

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as ality Alliance USA, LLC	it appears on the records	of the Florida Department
2. This limited liab Florida	ility company was organized	under the laws of:	
3. The Florida doct L120001590	ument/registration number of 93	this limited liability com	npany is:
4. L Christian G	onzalez	, hereby resign as a	MGRM
(Print A of this limited lia resignation in whether the second se	ame of Person Resigning) pility company and affirm the	e limited liability compar	(Print Title)
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		