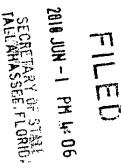
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Nesignatur 95 RA 06/01/10-01026--012 **35.00



COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: QUALITY HOME LOANS, INC.
	(Name of Corporation)
DOC	UMENT NUMBER: F05000004389
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Brer	nna Lutter
	(Name of Person)
BizF	ilings
	(Name of Firm/Company)
804	D Excelsior Dr Suite 200
	(Address)
Mad	ison, WI 53717
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Bren	na Lutter at (800) 981-7183 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo or \$35	sed is a check made payable to the Florida Department of State for \$87.50 for an active corporation 5.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Amen Divisi Clifto 2661	Mailing Address: dment Section on of Corporations on Building Executive Center Circle tassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509		
Florida Statutes, the undersigned, Business Filings Incorporated		
(Name of Registered Agent)		
hereby resigns as Registered Agent for QUALITY HOME LOANS, INC.		
(Name of Corporation)		
F05000004389		
(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.		
Blenne Lytter (Signature of Resigning Agent)		
If signing on behalf of an entity:		
Brenna Lutter		
(Typed or Printed Name)		
Assistant Secretary for Business Filings Incorporated		

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)