

F20 000000 1564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

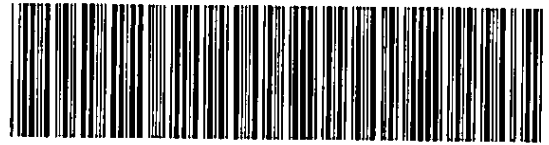
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TALLAHASSEE FL

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

QUALITY SERVICE HOSPITALITY INC

SUBJECT: _____
(Name of Corporation)

F20000001564

DOCUMENT NUMBER: _____

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marjorie Nestor

(Name of Person)

QUALITY SERVICE HOSPITALITY INC

(Name of Firm/Company)

1175 NE 125TH STREET SUITE 512

(Address)

NORTH MIAMI FLORIDA 33161

(City/State and Zip Code)

For further information concerning this matter, please call:

Marjorie Nestor

305

892-0680

(Name of Person)

at (_____)

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

2022 JAN 18 PM 4:19

SECRETARY OF STATE
TALLAHASSEE, FL

Martha Fonseca

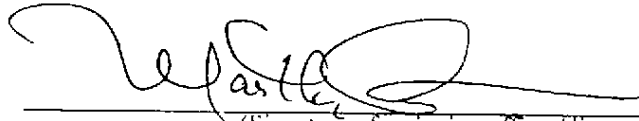
CFO

I, _____, hereby resign as _____
(Title)

QUALITY SERVICE HOSPITALITY INC
of _____
(Name of Corporation)

F20000001564

_____, a corporation organized under the laws of the State of
(Document Number, if known)
DELAWARE



(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

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