

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INCORPORATING SERVICES, LTD.

Account Number : 120050000052

Phone : (850)656-7956

Fax Number : (850)656-7953

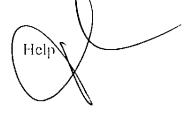
Enter the email address for this business entity to be used for future: annual report mailings. Enter only one email address please. 🖼 🕫

Email Address:___

REGISTERED AGENT RESIGNATION QUALITY BUILDING SERVICES CORP.

Certificate of Status Certified Copy () Page Count 0.2 Estimated Charge \$87.50

Electronic Filing Menu Corporate Filing Menu



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Incorporating Servic

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: QUALITY BUILDING SERVICES CORP.		
(Name of Corporation) DOCUMENT NUMBER: F21000005774	- -	
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for	r filing.	
Please return all correspondence concerning this matter to the following:	202	
Westley Look	2023 HAY	
(Name of Person)	16	7
Incorporating Services, Ltd. (Name of Firm/Company)	AN T Un	na' gre
3500 S DuPont Hughway	- FATE	
Dover, DE 19901 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Westley Look at (302) 531-0703 (Area Code & Daytime Telephone Number)	ī	

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address;
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327 Tallahassee, FL 32314

(Ha3000147651 3)

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, Incorporating Services, Ltd. (Name of Registered Agent)
hereby resigns as Registered Agent for QUALITY BUILDING SERVICES CORP.
(Name of Corporation)
F2100005774
(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.
Amanga Aschambault 75 5
If signing on behalf of an entity:
Amanda Archambault
(Typed or Printed Name)
Assistant Secretary
(Capacity)

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
Tallahassec, FL 32314