

Requestor's Name		<div style="font-size: 48pt; font-family: cursive;">F96000004047</div>
Address		
City/State/Zip	Phone #	
Office Use Only		

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #) 500002489605--7
04/15/98 01058 --009
*****87.50 *****87.50
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

SECRETARY OF STATE
 TALAHASSEE, FLORIDA

98 APR 17 AM 10:09

APPROVED
 AND
 FILED

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

F96000004047
 EARL
 286
 4-17-98

Examiner's Initials	
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Florida Department of State, Jim Smith, Secretary of State

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2) or 607.1509, Florida Statutes, the

undersigned, C T CORPORATION SYSTEM hereby resigns as
(name of registered agent)

Registered Agent for Q-ZAR FRANCHISING, INC.

(name of corporation)

ORGANIZED UNDER THE LAWS OF THE STATE OF Delaware

A copy of this resignation was mailed to the above listed corporation at its last known address.

C/O Q-Zar USA, Inc.

1701 Market Street Ste. 200

Dallas, TX 75202

Attn: Elizabeth Stout Financial Controller

The agency is terminated and the office discontinued on the 31st day after the date which the statement was filed.

Ken Alfieri

SIGNATURE

ASSISTANT SECRETARY

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 APR 17 AM 10:09

APPROVED
AND
FILED

FEE FOR FILING THIS DOCUMENT:

\$87.50-Active Corporation

\$35.00-Administratively Dissolved Corporation

Division of Corporations - P. O. Box 6327 - Tallahassee, FL 32314
CR2E046 (7-90)