

L09000077062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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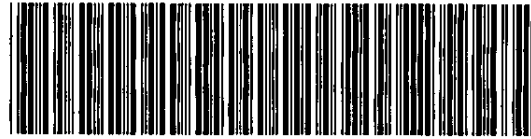
(Business Entity Name)

(Document Number)

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R. WHITE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: QUALITY LOGISTIC GROUP, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: 271060606

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN DAVID BERNAL

Name of Person

QUALITY LOGISTIC GROUP

Name of Firm/Company

163 SW 164th AVE

Address

PEMBROKE PINES, FL 33027

City/State and Zip Code

Juandavid1367@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan David Bernal at (786) 427 4864

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

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

STREET ADDRESS:

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Juan David Bernal

hereby resigns as

Name of Registered Agent

Registered Agent for Quality Logistic Group, LLC

Name of Limited Liability Company

271060606

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company 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.

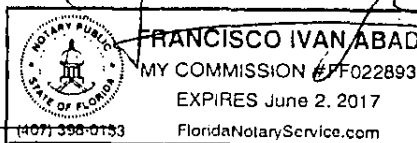
Signature of Resigning Agent

If signing on behalf of an entity:

Juan David Bernal

Typed or Printed Name

Capacity



FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314