L18000208073

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(0.1), 0.11.0.2, 1.11.0.1.4,		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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COVER LETTER

SUBJECT: VI Quality Training LLC Name of Limited Liability	Company
DOCUMENT NUMBER: <u>L18000208073</u>	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	
Address	
Austin, TX 78717	
City/State and Zip Code	
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (800 Area Code	773-0888 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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 provision	ons of section 605.0115, Florida Statutes, the under	signed,
United States Corporation Agents, Inc. her		hereby resigns as
		_ thereby resigns as
Registered Agent for $\frac{1}{2}$	/I Quality Training LLC	
	Name of Limited Liability Company	,
L18000208073		
Document N	lumber, if known	
A copy of this resignati	on was mailed to the above listed limited liability o	company at its last known address.
The agency is terminate	ed and the office discontinued on the 31st day after	the date on which this statement is filed.
	Signature of Resigning Agent	2021 SEP SECRETALLAN
If signing on behalf of a	an entity:	SEI SEI
	Cheyenne Moseley	
	Typed or Printed Name	25 ta 120
	Asst. Secretary for United States Corporation Age	ents, Inc.
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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