L19000212241

	(Requestor's Name)			
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
PICK-UF	P WAIT MAIL			
· · · · · · · · · · · · · · · · · · ·	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions	to Filing Officer:			
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COVER LETTER

SUBJECT: Qi Drinks LLC		
Name of Limited Liability	Company	
DOCUMENT NUMBER: L19000212241		
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	e 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	T	2021 I
raresignations@legalzoom.com	[편] [편] [소송	2021 OCT 15
E-mail address: (to be used for future annual report notification)	जिल्हा	ਂ ਹਾਂ
For further information concerning this matter, please call:	61 62 73	
800 at (773-0888	、
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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 provisions of section 605.011:	5. Florida Statutes, the unders	signed,		
United States Corporation Agents, Inc.		hereby resigns as		
Name of Registered Ager	ıl .	. Hereby resigns as		
Registered Agent for Qi Drinks LLC				
Name of Lim	ited Liability Company		,	
	Size Size Size Company			
L19000212241				
Document Number, if known				
A copy of this resignation was mailed to the a	bove listed limited liability co	ompany at its last knowr	n address.	
The agency is terminated and the office discor				
	Signature of Resigning Agent			
If signing on behalf of an entity:				
Cheyenne Mose	ley			
T	ped or Printed Name		20 S.	
Asst. Secretary for U	Asst. Secretary for United States Corporation Agents,		2021 OC1 SEGNET	. •
	Capacity		- AP-7 :	· 70
			HAS 15	. 54
FILING	PPPG			4
FILING 5 \$ 85.00 \$ 25.00	FEES: Active limited liability con Administratively dissolved withdrawn limited liability	npany // voluntarily dissolved/ / company		ブ

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