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(Requ	uestor's Name)	· • · · · · · · · · · · · · · · · · · ·
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(Addr	ess)	
(City/	State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Fil	ling Officer.	
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: The Qual-TEZ Group LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L23000467484	
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:	
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 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 provisio	ns of section 605.01	15, Florida Statutes, the under	signed,	
United States Corp	oration Agents, I	nc.	hereby resigns as	
	Name of Registered Ag	ent	nereby resigns as	
Registered Agent for <u>T</u>	he Qual-TEZ Gro	oup LLC		
			_	
	Name of Li	mited Liability Company	·································	
L23000467484				
Document No	ımber, if known	<u>- </u>		
A copy of this resignation	on was mailed to the	above listed limited liability c	ompany at its last known address.	
The agency is terminate	d and the office disc	ontinued on the 31st day after	the date on which this statement is	filed.
	Cris	E Treutlein Signature of Resigning Agent		
		Signature of Resigning Agent		
f signing on behalf of a	n entity:		25.2	
	Erik Treutlein			
	,	Typed or Printed Name		
	Vice President on behi	alf of United States Corporation Ag	ents, Inc.	
		Capacity	:	
			*** ***	
			ص	
	FILING	FEES:		
	\$ 85.00 \$ 25.00	Active limited liability cor Administratively dissolved withdrawn limited liability	npany / voluntarily dissolved/ / company	

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