## M52372

(Re	questor's Name)			
(Ad	dress)			
·	•			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
Tt				
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
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## **COVER LETTER**

	Amendment Section Division of Corporations	
SUBJE	H20 Quality Work	s, Inc.
	(Name of Corporation)  MENT NUMBER: M52372	
The enc	closed Resignation of Registered Agent for a Corporation	n and fee are submitted for filing.
Please re	return all correspondence concerning this matter to the fe	ollowing:
	Susan K. Robin, Esq.  (Name of Person)	
	Robin Law, P.A.  (Name of Firm/Company)	
	1123 S. 21st Street  (Address)	
	Hollywood, FL 33020 (City/State and Zip Code)	
For furth	ther information concerning this matter, please call:	
Susa	(Name of Person) at (305) (Area Code & D	206-8224 Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60	7.0502(2), 617.0502(2), 607.1509, or 617.150	)9,		
Florida Statutes, the undersigned, Susan K. Robin				
	(Name of Registered Agent)		•	
hereby resigns as Registered Agent for _	H20 Quality Works, Inc.		_	
1450070	(Name of Corporation)			
M52372	_			
(Document Number, if known)				
A copy of this resignation was mailed to	the above listed corporation at its last known	address.	•	
The agency is terminated and the office of this statement is filed.	discontinued on the 31st day after the date on	which		
Susa (Sign	nature of Resigning Agent)			
If signing on behalf of an entity:				
(Т	yped or Printed Name)			
<del>.</del>	(Capacity)	SECR TALLA	74 AL	
\$87.50 - Activ \$35.00 - Adm	this document:  ve Corporation  iinistratively dissolved/voluntarily dissolved/ drawn corporation	ETARY OF STATE HASSEE, FLORIDA	AUG 27 PM 3: 54	APPROVED AND FILED

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