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OFFICE OF COMPORATIONS

COVER LETTER

TO: Amendment Section Division of Corporations							
SUBJECT: QUALITAS CORPORATION (Name of Corporation)							
DOCUMENT NUMBER:							
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
TRIPURANENI KRISHNA (Name of Person) QUALITAS CORPORATION. (Name of Firm/Company) 1157 Soury State ROAD 7 (Address) WELLIN GTON, FLORIDA 33414 (City/State and Zip Code)							
For further information concerning this matter, please call:							
ANTHONY Pollack at (561) 795-3330 (Area Code & Daytime Telephone Number)							
Enclosed is a check for \$35.00 made payable to the Florida Department of State.							

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

,	KRISHNA TRIPUS	ANENI, he	ereby resign as_	750,440 (TI	DIREC (le)	1 08
of_	QUALTAS	Co R (o le of Corporation)	74-ion			,
	(Document Number, if known)	. ,	on organized und	der the laws of the	State of	
		(Signature of resig	PMA Thing officer/direct	- G·1·06	06 JUL 14 PM12: 35	SECRETARY OF STAIL DIVISION OF CORPORATIONS

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314