Po8000134 23

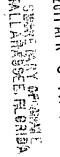
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

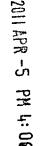
Office Use Only



100199784501

04/05/11--01002--017 **85.00







COVER LETTER

Bren	(Name of Person) at (608) 827-5300 (Area Code & Daytime Telephone Number)	
For fu	arther information concerning this matter, please call:	
	(City/State and Zip Code)	
Mad	lison, WI 53717	
	(Address)	
8040	0 Excelsior Dr Ste 200	
	(Name of Firm/Company)	
Busi	iness Filings Incorporated	
·	(Name of Person)	
Brer	nna Lutter	
Please	e return all correspondence concerning this matter to the following:	
The en	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filin	ıg.
DOC	UMENT NUMBER: P08000013423	
	(Name of Corporation)	
SUBJ	JECT: QUANTUM QUALITY GROUP, INC.	
	Division of Corporations	

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections of	07.0502(2), 617.0502(2), 607.1509, 6r 617.150	J9,		
lorida Statutes, the undersigned,BUSINESS FILINGS INCORPORATED				
	(Name of Registered Agent)			
hereby resigns as Registered Agent for				
, , ,	(Name of Corporation)			
P08000013423				
(Document Number, if known)	_			
A copy of this resignation was mailed to	o the above listed corporation at its last known	address.		
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on	which		
Brenna	gnature of Resigning Agent)	20 S		
If signing on behalf of an entity:		2011 APR	was see	
Business Filings I	ncorporated	<u> </u>	ja saara Taabaan Taabaan	
(Typed or Printed Name)	PH		
Asst. Secretary		¥.0€	an referen	

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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

(Capacity)