# P20000071297

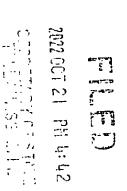
(Requestor's Name)
(Address)
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#### **COVER LETTER**

Division of Corporations				
Que's Unified Entertainment Studio	s, Inc.			
<del></del>	(Name of Corp	oration)		
DOCUMENT NUMBER: P20000071297  The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for fi				
Ed Tsuji				
(Name of Person)				
MyCompanyWorks, Inc.				
(Name of Firm/Company	;)			
187 E. Warm Springs Rd., Suite B				
(Address)				
Las Vegas, NV 89119				
(City/State and Zip Code	:)			
For further information concerning this m	atter, please ca	dt:	e.c	20
Jennifer Peters	702 at (	362-2677 Ode & Daytime Telephor		22 OC
(Name of Person)	(Area C	ode & Daytime Telephor	ne Number)	<u>- 5</u>
Enclosed is a check made payable to the l	Florida Departr	nent of State for \$87.50	ن المراقعة ( ) For an active co	
or \$35.00 for an administratively dissolve	ed, voluntarily	dissolved or withdrawn	corporation	

## **Mailing Address:**

TO: Amendment Section

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

## **Street Address:**

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

# RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ns 607.0503(2), 617.0502(2), 607.1509, or (	617.1509,	
Florida Statutes, the undersigned,	Registered Agent Solutions, Inc.		
	(Name of Registered Agent)		
hereby resigns as Registered Agent	Que's Unified Entertainment Studios, Inc.		
	(Name of Corporation)		
P20000071297			
(Document Number, if known)			
A copy of this resignation was mail	ed to the above listed corporation at its last	known address.	
The agency is terminated and the of this statement is filed.	ffice discontinued on the 31st day after the o	date on which	
Jimy	(Signature of Resigning Agent)	_	
If signing on behalf of an entity:			
Jennifer Peters		€ <b>2</b> 0	
	(Typed or Printed Name)	2022 0C1 \$-50.7.	
Assistant Secretary o	f Registered Agent Solutions, Inc.	<u> </u>	
	(Capacity)	- PM 4:1	

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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