

Requester's Name

**1 From (Shipper)**

Account no.

867292073

Shipper's reference

Composition

5. Company name

QUALITY FINANCIAL INVESTMENTS

Shipper's name

Monica Denyer.

Address

B900 SW 107TH AVE
STE 301
MIAMI FL 33176-1451

Zip code (required)

33175-1451

Phone/Fax/E-mail

305-595-2366

(Corporation Name)

Office Use Only

MEMBER(S), (if known):

= (Document #)

(Document #)

3. _____
(Corporation Name)

(Document #)

4. _____ (Corporation Name)

(Document #)

 Walk in

 Pick up time

 Certified Copy

☐ Mail out

☐ Will wait Photocopy

Certificate of Status

NEW FILINGS

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

AMENDMENTS

☐ Amendment
☒ Resignation of R.A. Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

CR2E031(7/97)

OFFICER / DIRECTOR RESIGNATION

I, Monica Denyer, hereby resign as VP/S.
(Title)
of Quality Financial Investment Corp.
(Name of Corporation)
a corporation organized under the laws of the State of Florida.

and affirm that the corporation has been notified in writing of the resignation.

Monica Denyer
(Signature of resigning officer/director)

FILING FEE IS \$35.00

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

SECRET
TALLAHASSEE

01 JUN

F11