L00000001684

(Requestor's Name)	
(Address)	—
(Address)	
(City/State/Zip/Phone #)	
(10)	
PICK-UP WAIT MAIL	
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2023 SEP 21 AM 10: 29



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

CONTACT PERSON: Eyliena Baker -- EXT#

Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE : 980050 8323810 AUTHORIZATION : COST LIMIT : ORDER DATE: September 11, 2023 ORDER TIME : 10:01 AM ORDER NO. : 980050-020 CUSTOMER NO: 8323810 CHANGE OF AGENT Commercial LIL NAME: OAIA ASSOCIATES, INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporation	ns		
OAIC COMMERCIA SUBJECT:			
SUBJECT:	Name of Li	mited Liability	Company
DOCUMENT NUMBER: LOC	0000001689		
The enclosed Resignation of R for filing.	egistered Agent	for a Limited	d Liability Company and fee are submitted
Please return all correspondence	ce concerning th	nis matter to tl	he following:
RESIGNATIONS DEPARTMENT			
Name of	Person		-
CORPORATION SERVICE COMP	ANY		
Name of Firm	n/Company		-
251 LITTLE FALLS DRIVE			
Addr	ess	.	-
WILMINGTON, DE 19808			
City/State and	d Zip Code		-
ANNUALREPORTS@CSCGLOBA	L.COM		
E-mail address: (to be used for	future annual repor	rt notification)	-
For further information concer	ning this matter.	. please call:	
RESIGNATION DEPT	а	800 at (927-9801
Name of Person		Area Code	Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:

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

Street Address:

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



September 22, 2023

CSC

SUBJECT: OAIC COMMERCIAL ASSETS LLC

Ref. Number: L0000001689

RESUBMI

Please give original submission date as file date.

We have received your document for OAIC COMMERCIAL ASSETS LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name on Resignation does not match the document number listed.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 723A00021988



STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	sions of section 605.0115. Florida Statutes, th	ne undersigned.			
CORPORATION SERVICE COMPANY		hereby resigns as	;		
	Name of Registered Agent				
Registered Agent for	OAIC COMMERCIAL ASSETS LLC				-
-	Name of Limited Liability Company				- •
1.00000001689					
Document	Number, if known				
A copy of this resigna	ation was mailed to the above listed limited I	iability company at its last	. known a	ddress.	
The agency is termina	ated and the office discontinued on the 31st of the state of Resigning		this state		s filed.
If signing on behalf o	f an entity:		ALC OLG	023	
	BY JEANNETTE JONES		E AH	2023 SEP 21	77
	Typed or Printed Name		AHASSE	2	
	VICE PRESIDENT		1117		· m
	Capacity		FLORIDA	AM 10: 29	Ö
	FILING FEES: \$ 85.00 Active limited liab \$ 25.00 Administratively of withdrawn limited	oility company dissolved/ voluntarily diss d liability company		w .	

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