

LO9 0000 71531

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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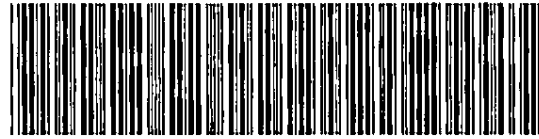
(Business Entity Name)

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2017 OCT 17 AM 8:01
FBI - JAX

OCT 20 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ORACLE CONSULTING GROUP LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L 09000071531

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHAWNAN IGHODARO
Name of Person

ORACLE CONSULTING GROUP
Name of Firm/Company

17220 NW 20 AVENUE
Address

MIAMI GARDENS, FL 33056
City/State and Zip Code

ighodaro2012@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHAWNAN IGHODARO at (305) 343-5006
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 15, 2017

SHANNAN IGHODARO
17220 NW 20 AVENUE
MIAMI GARDENS, FL 33056

SUBJECT: ORACLE CONSULTING GROUP, LLC
Ref. Number: L09000071531

2017 OCT 17 AM 8:52
Jenna D Harris
Regulatory Specialist II

We have received your document for ORACLE CONSULTING GROUP, LLC and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$60.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 317A00018865

2017 OCT 17 AM 8:01
Jenna D Harris
Regulatory Specialist II

11/15/17

**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

ERHABOR IGHODARO, hereby resigns as
Name of Registered Agent

Registered Agent for ORACLE CONSULTING GROUP LLC

Name of Limited Liability Company

L09000071531
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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

2017 OCT 17 AM 8:01