

L23000295250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

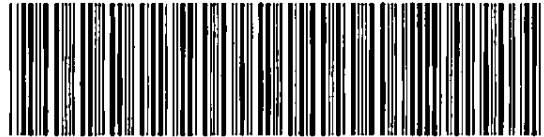
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
OCT - 7 2023

Office Use Only



600415204656

09/11/23--01022--016 **85.00

FILED
23 SEP 11 AM 10:43
CLERK OF SUPERIOR COURT
JANUARY 11, 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: REDFIELD CONSULTING GROUP, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L23000295250

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:

Anthony J. DiGiore, Esq.

Name of Person

DiGiore Legal Group

Name of Firm/Company

1830 W. Broward Blvd

Address

Fort Lauderdale, FL 33312

City/State and Zip Code

anthony@digiorelegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anthony J. DiGiore, Esq.

954

289-3494

at (_____) _____

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

DIGIORE LEGAL GROUP

, hereby resigns as

Name of Registered Agent

Registered Agent for REDFIELD CONSULTING GROUP, LLC

Name of Limited Liability Company

L23000295250

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:

Anthony J. DiGiore, Esq

Typed or Printed Name

Partner/Attorney

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

FILED
23 SEP 11 AM 10:43
TALLAHASSEE, FL
DIVISION OF CORPORATIONS