## P12000085178

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: OXDA GROUP INC.	
(Name of Corpor	ation)
DOCUMENT NUMBER: P12000085178	
The enclosed Resignation of Registered Agent for a Corpo	oration and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Mary Jo Spalinger	
(Name of Person)	<del>-</del>
Business Filings Incorporated	~ ~
(Name of Firm/Company)	- SEC
8020 Excelsior Dr., Suite 200	THE TARK
(Address)	and and
Madison, WI 53717	
(City/State and Zip Code)	
For further information concerning this matter, please call	· · · · · · · · · · · · · · · · · · ·
Mary Jo Spalinger 31,800	<sub>\</sub> 981-7183

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

(Area Code & Daytime Telephone Number)

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Name of Person)

**Mailing Address:** 

Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.	1509,			
lorida Statutes, the undersigned, BUSINESS FILINGS INCORPORATED				
(Name of Registered Agent)		<del></del>		
hereby resigns as Registered Agent for OXDA GROUP INC.				
(Name of Corporation)				
P12000085178				
(Document Number, if known)				
A copy of this resignation was mailed to the above listed corporation at its last know.  The agency is terminated and the office discontinued on the 31st day after the date of the continued on the 31st day after the date of the continued on the 31st day.				
this statement is filed.	on wine			
Mory Solution (Signature of Resigning Agent)	SECRE!	16 JUL		
If signing on behalf of an entity:	\$0.50 \$0.50	2		
Mary Jo Spalinger (Typed or Printed Name)				
(Typed of Trined (Valle)	10 × 10 × 10 × 10 × 10 × 10 × 10 × 10 ×	2		
Asst. Secretary for Business Filings Incorporated				
(Capacity)				

**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for filing this document:** \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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