

# L13000111066

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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(Business Entity Name)

\_\_\_\_\_  
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2014 MAY 31 A 12:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten signature*  
JUN 11 2015  
HEMIEUX

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BGL LOGISTIC CONSULTING INTERNATIONAL LLC

\_\_\_\_\_  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L13000111066

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:

Jennifer Gil

\_\_\_\_\_  
Name of Person

Worldwide Corporate Administrators LLC

\_\_\_\_\_  
Name of Firm/Company

2330 Ponce De Leon Blvd, Suite 201

\_\_\_\_\_  
Address

Coral Gables, Florida 33134

\_\_\_\_\_  
City/State and Zip Code

gil@floridacpa.com

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

For further information concerning this matter, please call:

Jennifer Gil

\_\_\_\_\_  
Name of Person

at ( 305 ) 444-8800

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

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

Worldwide Corporate Administrators LLC

, hereby resigns as

Name of Registered Agent

Registered Agent for BGL LOGISTIC CONSULTING INTERNATIONAL LLC

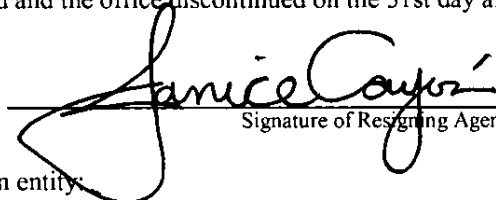
Name of Limited Liability Company

L13000111066

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:

Janice Cayon

Typed or Printed Name

Director

Capacity

2014 MAY 30 A 12:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED