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COVER LETTER

SUBJECT: BERTO & NOAH LLC Name of Limited Liability Company DOCUMENT NUMBER: L18000192258 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: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 101 North Brand Blvd, 11th Floor Address Glendale, CA 91203 City/State and Zip Code raresignations@legalzoom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kasandra Lund 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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: STREET ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

TO:

Registration Section
Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ions of section 605.01	15, Florida Statutes, the undersigned,	
United States Cor	poration Agents, Ir	nc. , hereby resign	s as
	Name of Registered Age		
Registered Agent for_	BERTO & NOAH L	LC	
	Name of Lin	nited Liability Company	
L18000192258			
Document 8	Sumber, if known		
A copy of this resigna	tion was mailed to the	above listed limited liability company at its last kn	own address.
The agency is terminate	ed and the office discor	ntinued on the 31st day after the date on which this sta	tement is filed.
		Signature of Resigning Agent	
If signing on behalf of	an entity:		
	Cheyenne Mose	eley	
		yped or Printed Name	
	Asst. Secretary for U	Inited States Corporation Agents, Inc.	
		Capacity	in the second se
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability company Administratively dissolved/ voluntarily dissolved withdrawn limited liability company	10 A

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

1