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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Bertram Sails L.L.C.	
Name of Limited Liability	Company
DOCUMENT NUMBER: L22000502171	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
United States Corporation Agents, Inc.	
Name of Person	•
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	
Address	
Austin, TX 78717	
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:	
31 (800	773-0888
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115, Florida St	atutes, the undersigned,		
United States Corporation Agents, Inc. Name of Registered Agent		hereby rec	, hereby resigns as	
		, nereby resi	g113 d3	
Registered Agent for	Bertram Sails L.L.C.			
	Name of Limited Liability (Company	·	
L22000502171				
Document N	umber, if known			
	on was mailed to the above listed led and the office discontinued on the		which this statement is file	id.
	Signature of	Resigning Agent	200 - 100 -	
If signing on behalf of a	nn entity:		三三	·
	Cheyenne Moseley		AH 11: 52	
	Typed or Printed	Name	2/	
	Asst. Secretary for United States	Corporation Agents, Inc.		
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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