157203

(Re	equestor's Name)	,
		•.
(Ad	ldress)	
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(Ad	ldress)	
(Cit	ty/State/Zip/Phone	; #)
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PICK-UP	☐ WAIT	MAIL
	isiness Entity Nam	
(Bu	isiness Enuty Nan	ie)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	





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87 / Du Resign

TALLAHASSEF F. STATE

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: Bertrand, Inc
	(Name of Corporation)
DOC	UMENT NUMBER: V57203
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
Gor	don R. Bertrand
	(Name of Person)
Bert	rand, Inc
	(Name of Firm/Company)
304	Maple Grove Avenue
	(Address)
Unio	ondale NY 11553
*	(City/State and Zip Code)
For fu	orther information concerning this matter, please call:
Gord	Ion R. Bertrand at (5/6) 48/-3/98 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	Mailing Address: Address: Address: Amendment Section Amendment Section Division of Corporations n Building Executive Center Circle hassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Joyce L. Bertrand	, hereby resign as	Secretary
	, <u>,</u> <u></u>	(Title)
of Bertrand, Inc.		
~ <u></u>	(Name of Corporation)	
V57203	, a corporation organized und	er the laws of the State of
(Document Number, if known))	
Florida		

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314