

Bermuda One Fund LLC

Form 3

February 15, 2019

FORM 3**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF
SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting
Person *

Â Bermuda One Fund LLC

(Last)

(First)

(Middle)

C/O MQ SERVICES
LTD.,Â VICTORIA PLACE, 31
VICTORIA STREET

(Street)

HAMILTON,Â D0Â HM 10

(City)

(State)

(Zip)

2. Date of Event Requiring
Statement

(Month/Day/Year)

02/14/2019

3. Issuer Name **and** Ticker or Trading Symbol
AGILYSYS INC [AGYS]4. Relationship of Reporting
Person(s) to Issuer5. If Amendment, Date Original
Filed(Month/Day/Year)

(Check all applicable)

____ Director ☒ 10% Owner
____ Officer ____ Other
(give title below) (specify below)

6. Individual or Joint/Group
Filing(Check Applicable Line)____ Form filed by One Reporting
Person☒ Form filed by More than One
Reporting Person**Table I - Non-Derivative Securities Beneficially Owned**1. Title of Security
(Instr. 4)2. Amount of Securities
Beneficially Owned
(Instr. 4)3. Ownership
Form:
Direct (D)
or Indirect
(I)
(Instr. 5)4. Nature of Indirect Beneficial
Ownership
(Instr. 5)

Common Stock

2,875,891 (1)

I

See Footnote (1) (2)

Reminder: Report on a separate line for each class of securities beneficially
owned directly or indirectly.

SEC 1473 (7-02)

**Persons who respond to the collection of
information contained in this form are not
required to respond unless the form displays a
currently valid OMB control number.**

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)1. Title of Derivative Security
(Instr. 4)2. Date Exercisable and
Expiration Date
(Month/Day/Year)3. Title and Amount of
Securities Underlying
Derivative Security
(Instr. 4)4. Conversion
or Exercise
Price of
Derivative5. Ownership
Form of
Derivative
Security:6. Nature of Indirect
Beneficial Ownership
(Instr. 5)

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Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)
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Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Bermuda One Fund LLC C/O MQ SERVICES LTD. VICTORIA PLACE, 31 VICTORIA STREET HAMILTON, HM 10	^	^ X	^	^
VP Bermuda LLC C/O MCCARTER & ENGLISH, LLP 825 EIGHTH AVENUE, 31ST FLR. NEW YORK, NY 10019	^	^ X	^	^
Vogel Scott D. C/O MCCARTER & ENGLISH, LLP 825 EIGHTH AVENUE, 31ST FLR. NEW YORK, NY 10019	^	^ X	^	^

Signatures

/s/ Scott D. Vogel, individually, and as Managing Member of VP Bermuda LLC, Managing Member of Bermuda One Fund LLC

02/14/2019

____Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) These shares of Common Stock are held by Bermuda One Fund LLC of which VP Bermuda LLC is the managing member and Scott D. Vogel is the managing member of VP Bermuda LLC. The shares were transferred by MAK Capital Fund LP ("MAK Fund") and MAK-ro Capital Master Fund LP (the "MAK-ro Fund") and represent the pro rata shares of Common Stock of certain redeemed or partially redeemed investors of MAK Fund and MAK-ro Fund.

(2) VP Bermuda LLC and Scott D. Vogel may be deemed to indirectly beneficially own the shares of common stock held by Bermuda One Fund LLC, however each of VP Bermuda LLC and Scott D. Vogel disclaims beneficial ownership of such securities, except to the extent of its or his pecuniary interest therein.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.