

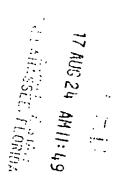
(Re	questor's Name)	
(Ade	dress)	
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(Cit	y/State/Zip/Phone	<del>: #)</del>
PICK-UP	TIAW	MAIL
(Bu:	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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AUG 2 5 2017 Y 51 11 14 TR



August 9, 2017

ISAAC REMBALSKY 1223 LUCHETTI STREET SAN JUAN PR 00907,

SUBJECT: REMBALSKY PR HOLDINGS LLC

Ref. Number: M16000008215

2017 AUG 25 AM II: 92.

We have received your document for REMBALSKY PR HOLDINGS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 817A00016272

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJF	REMBALSKY PR HOL	DINGS LLC		
1901201	Name of Foreign	Limited Liabili	ty Compa	nny
Dear Si	ir or Madam:			
The end	closed application, certificate and fee(s) a	re submitted for	filing.	
Please	return all correspondence concerning this	matter to the fo	llowing:	
1	SAAC REMBALSKY			
	Name of Person			
R	EMBALSKY PR HOLDINGS 1.LC			
	Firm/Company			
E	DIFICIO ROMAN MANSIONS APT. 9			
1	223 LUCHETTI STREEFSS			
S	AN JUAN, PR 00907			
	City/State and Zip Code			
i	saacrembalsky⊕hotmail.com			
E-ma	ail address: (to be used for future annual r	eport notificatio	en)	
For fur	ther information concerning this matter, p	lease call:		
1	SAAC REMBALSKY	at ( <u>787</u> )	565-	8500
	Name of Person			Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registra Divisior P.O. Bo	NG ADDRESS: ation Section of Corporations of 327 ssee, Florida 32314
	ed is a check for the following amount: Filing Fee \$\sum \text{\$30 Filing Fee & Certificate of Status}\$	S55 Filing		S60 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it ap	pears on the records of the Florida Department of			
State:REMBALSKY_PR_HOLDIN	IGS_LLC			
Enter new principal office address, if applical	ole:			
(Principal office address	EDIFICIO ROMAN MANSIONS APT. 9			
MUST BE A STREET ADDRESS)	1223 LUCHETTI STREET			
	SAN JUAN, PR 00907			
Enter new mailing address, if applicable:	EDIFICIO ROMAN MANSIONS APT. 9			
(Mailing address MAY BE A POST OFFICE BOX)	1223 LUCHETTI STREET			
<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	SAN JUAN, PR 00907			
2. The Florida document number of this limite	ed liability company is:			
3. Jurisdiction of its organization: PU	ERTO RICO AND FLORIDA			
SECTION II (5-9 complete only the application of the section of th	ible changes)			
5. New name of the limited liability company	N/A SSI			
	(must contain "Limited Liability Company, " "L.L.C., "or, "L.L.S.")			
	opted for the purpose of transacting business in Florida; and attach a r managing members adopting the alternate name. The alternate name L.L.C." or "LLC.")			
6. If amending the registered agent and/or reg registered agent and/or the new registered off	istered officer address on our records, enter the name of the new ice address here:			
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
	Enter Florida Street Address			
	, Florida			
the provisions of all statutes relative to the pr and accept the obligations of my position as r	l agent and agree to act in this capacity. I further agree to comply with oper and complete performance of my duties, and I am familiar with egistered agent as provided for in Chapter 605, F.S. Or, if this ange in the registered office address. I hereby confirm that the limited of this change.			
	N/A If Changing Registered Agent Signature of New Registered Agent			

8. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change: ADD: RAQUEL ANAVI DE REMBALSKY ADD: JONATHAN REMBALSKY							
itle/ Capacity	<u>Name</u>	Address	Type of Action				
1GR	RAQUEL ANAVI DE REMBALSKY	EDIFICIO ROMAN MANSIONS	APT 9 MAdd				
<del></del>		1223 Luchetti ST. SAN JUAN, PR 00907					
			Remov				
MGR JONATHAN REMBALSKY	EDIFICIO ROMAN MANSIONS	APT. Add					
		1223 LUCHETTI ST. SAN JUAN, PR 00907	Remov				
			<u>:</u> □Add				
			Sin Remove				
			Add Add				
			Remove				
			Add				
			Remov				
aforemention	certificate, if required: no more than 90 d ned amendment(s), duly authenticated by the under the law of which this authry is organi	he official having custody of records in	the				

Filing Fee: \$25.00