

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000043522

Entity Name: REMIS PARTNERS LLC

**FILED**  
**Nov 20, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

110 EAST ATLANTIC AVE  
SUITE 230  
DELRAY BEACH, FL 33444

**New Principal Place of Business:**

**Current Mailing Address:**

110 EAST ATLANTIC AVE  
SUITE 230  
DELRAY BEACH, FL 33444

**New Mailing Address:**

FEI Number: 20-1226304      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

EMAS, JOSEPH I  
1224 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139      US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOSEPH EMAS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: ROWE, CHRIS C  
Address: 110 EAST ATLANTIC AVE, SUITE 2309  
City-St-Zip: DELRAY BEACH, FL 33444

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHRIS ROWE

MGRM

11/20/2008

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date