1417000005091

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	s to Filing Officer:	
W KAY 30 FM 5: 68	TARKS C. T. ON B. C. T. ON B. C. T. ON B. C. T. C. ON B. C. T. C.	
ED.	Office Use Only	



900299344469

05/31/17--01006--022 **125.00

17 JUN 14 MM 9: 49
SEURE DARY OF STATE ORIGINAL CORRESPONDANCE OF THE ORIGINAL CORRESPONDANCE

JUN 1 5 2017 Y SULKER

10112 10106



978 Douglas Avenue, #102. Altamonte Springs, Florida 32714

Phone: (407) 331-0678 Fax: (407) 389-0510 Web: www.gvc-financial.com Email: ContactUs@gvc-financial.com

May 25, 2017

FL Division of Corporations Registration Section P. O. Box 6327 Tallahassee, FL 32314

Re: Rimalo, LLC registration

Dear Registration Section,

Enclosed is the Application by Foreign LLC for Authorization to transact business in FL by Rimalo, LLC, originally a SC LLC whose owner moved to Florida earlier this month, along with a check & info showing it remains in Good Standing in SC as of today & proof of 2016 tax return filing that we filed which includes the FEIN.

Should you have any questions, you may contact me at 407 331-0678 or Rich at 803 687-8803.

Print B. Com, EA

Sincerely,

Richard B. Crouse, MBA, CFP, EA, CEPA

Enrolled to Practice before the IRS (00055544-EA)



June 1, 2017

RICHARD SCHWARTZ 630 MALLET BAYOU ROAD FREEPORT, FL 32439

SUBJECT: RIMALO; LLC Ref. Number: W17000046436

We have received your document for RIMALO, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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: 217A00011030

Yasemin Y Sulker Regulatory Specialist II

MIT OF SECTIONS ALL ASSECTIONS

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: RIMALO, LLC		
	f Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Cor Existence, and check are submitted to register the above refe		
Please return all correspondence concerning this matter to the	e following:	
RICHARD SCHWA	RTZ	
 	Name of Person	
RIMALO, LLC		
	Firm/Company	
630 MALLET BAY	DU ROAD	
	Address	
FREEPORT, FL 32	2439	
City	State and Zip Code	
RADRIT@GMAIL.C		
·	sed for future annual report no	tification)
For further information concerning this matter, please call:		
Richard R Schwartz	$_{\rm at}$ 803 $_{\rm 0}$ 687	7-8803
Name of Contact Person	Area Code Day	time Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registrat Clifton B 2661 Exe	r ADDRESS: of Corporations ion Section suilding ecutive Center Circle see, FL 32301
Enclosed is a check for the following amount: \$125.00 Filing Fee \$\square\$\$ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FCR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If r		Limited Liability Company; must include "Lu ame adopted for the purpose of transacting business in				L.L.C." or "L.L.C.")
	sc		26	4708678	·····, ····/, ····/,	
		nich foreign limited hability company is organized)	3. <u>30-</u>		er, if applicable)	
4.	MAY 1, 2017					
		(Date first transacted business in Florida, if prio (See sections 605 0904 & 605,0905, F.S. to det	or to registration) termine penalty hability))		
5.	630 MALLET BAYO		6. <u>S</u> AN			
	(Street Address of F FREEPORT, FL 324			(Maihng Addr	ess)	
	<u></u>			· · · · · · · · · · · · · · · · · · ·		
7.	Name and street addres	s of Florida registered agent: (P.O. B	Box <u>NOT</u> accept	able)		
	Name:	RICHARD SCHWARTZ				
	Office Address:	630 MALLET BAYOU ROAD		_		
		•				
Ha	gistered agent's accep ving been named as re	gistered agent and to accept service o	of process for th	_ , Florida 32439 (Zip code e above stated limited gent and agree to act	liability com	pany at the place
Ha les o c	gistered agent's acceptiving been named as resignated in this applicationally with the provisi	(City)	nt as registered a per and complete Geld (18	(Zip code e above stated limited gent and agree to act	liability com in this capaci	ity. further agre
Ha les o c m	gistered agent's accep wing been named as re signated in this applica comply with the provisi I accept the obligations	(City) Itance: Igistered agent and to accept service of the appointment ons of all statutes relative to the property of my position as registered agent.	nt as registered a per and complete the signature of has/have author	(Zip code e above stated limited gent and agree to act e performance of my d	liability com in this capaci	ity. Efurther agre am familiar with R
Ha les o c m	gistered agent's acception wing been named as resignated in this applicationally with the provision accept the obligations. The name, title or capa	(City) Hance: Agistered agent and to accept service of the appointment ons of all statutes relative to the property of my position as registered agent. (Registered agent city and address of the person(s) who	ner and complete The second complete The second complete The second complete The second complete Title or	e above stated limited gent and agree to act e performance of my d	liability OF STAIL liability of SEE. FLORID	ity. Efurther agre am familiar with R
Ha les o c m	gistered agent's acception been named as resignated in this applicationally with the provisid accept the obligations. The name, title or capa	(City) Hance: Agistered agent and to accept service of the appointment ons of all statutes relative to the property of my position as registered agent. (Registered agent of the person(s) who Name and Address:	ner and complete The second complete The second complete The second complete The second complete Title or	e above stated limited gent and agree to act e performance of my d	liability OF STAIL liability of SEE. FLORID	ity. Efurther agre am familiar with R
Ha les o c m	gistered agent's acception been named as resignated in this applicationally with the provisid accept the obligations. The name, title or capa	(City) Hance: gistered agent and to accept service of the appointment ons of all statutes relative to the property of my position as registered agent. (Registered agent city and address of the person(s) who Name and Address: RICHARD SCHWARTZ 630 MALLET BAYOU ROAD	ner and complete The second complete The second complete The second complete The second complete Title or	e above stated limited gent and agree to act e performance of my d	liability OF STAIL liability of SEE. FLORID	ity. Efurther agre am familiar with R
Ha les o c m	gistered agent's acception been named as resignated in this applicationally with the provisid accept the obligations. The name, title or capa	(City) Hance: gistered agent and to accept service of the appointment ons of all statutes relative to the property of my position as registered agent. (Registered agent city and address of the person(s) who Name and Address: RICHARD SCHWARTZ 630 MALLET BAYOU ROAD	ner and complete The second complete The second complete The second complete The second complete Title or	e above stated limited gent and agree to act e performance of my d	liability OF STAIL liability of SEE. FLORID	ity. Efurther agre am familiar with R
Ha les to c ma	gistered agent's acception been named as resignated in this applicationally with the provisid accept the obligations. The name, title or capa	(City) Itance: gistered agent and to accept service of gistered agent and to accept service of gion, I hereby accept the appointment ons of all statutes relative to the property of my position as registered agent. (Registered agent and Address of the person(s) who Name and Address: RICHARD SCHWARTZ 630 MALLET BAYOU ROAD FREEPORT, FL 32439	ner and complete The second complete The second complete The second complete The second complete Title or	e above stated limited gent and agree to act e performance of my d	liability OF STAIL liability of SEE. FLORID	ity. Efurther agre am familiar with R

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

RIMALO LLC,

a limited liability company duly organized under the laws of the State of South Carolina on September 12th, 2011, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 7th day of June, 2017.

Mark Hammond, Secretary of State