

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000084508

**Entity Name:** SPLIT ENDS, LLC

**Current Principal Place of Business:**

920 N.W. 36TH STREET  
MIAMI, FL 33127

**Current Mailing Address:**

920 N.W. 36TH STREET  
MIAMI, FL 33127

**FEI Number:** 27-0877939

**Certificate of Status Desired:** No

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

OLACIO, JOSE R  
920 N.W. 36TH STREET  
MIAMI, FL 33127 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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name OLACIO, JOSE R  
Address 920 N.W. 36TH STREET  
City-State-Zip: MIAMI FL 33127

Title MGRM  
Name BALBUENA, CARLOS J  
Address 920 N.W. 36TH STREET  
City-State-Zip: MIAMI FL 33127

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOSE OLACIO

**BUSINESS OWNER**

**04/01/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date