

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000014435

Entity Name: SPLIT-NZ L.L.C.

**FILED**  
**Mar 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3540-106 HGWY 17  
GREEN COVE, FL 32043

**New Principal Place of Business:**

**Current Mailing Address:**

3540-106 HGWY 17  
GREEN COVE, FL 32043

**New Mailing Address:**

FEI Number: 11-3681079

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MATTINGLY, LORES M  
463 FEDERAL HILL RD  
ORANGE PARK, FL 32073 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MATTINGLY, LORES M  
Address: 463 FEDERAL HILL RD  
City-St-Zip: ORNAGE PARK, FL 32073

Title: MGRM  
Name: MATTINGLY, CASEY  
Address: 463 FEDERAL HILL RD  
City-St-Zip: ORNAGE PARK, FL 32073

I hereby 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: LORES M MATTINGLY

OWNE

03/11/2011

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