

LOT 000101739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

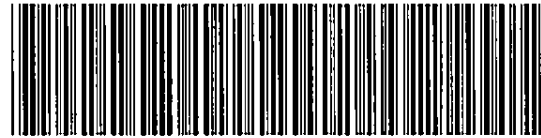
Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J. HORNE  
SEP 23 2024

J. HORNE  
SEP 23 2024

Office Use Only



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2024 SEP 20 AM 9: 34

2024 SEP 20 PM 3:11

STATE OF FLORIDA



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations  
From: Amanda Miller - Amanda.Miller@cscglobal.com  
Ext: x62969  
Date: 09/20/24  
Order #: 1628349-1  
Re: Rockwall Capital LLC  
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

- Change of Registered Agent and Office
- Check in the amount of: \$125.00 - FL State Account Number: I20000000195

Please take the following action:

- File on a routine basis
- Issue proof of filing
- Return evidence to the following:  
ATTN: Amanda Miller  
c/o Corporation Service Company  
251 Little Falls Drive  
Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Rockwall Capital LLC

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jackie Holder, Bookkeeper

\_\_\_\_\_  
Name of Person

Rockwall Capital LLC

\_\_\_\_\_  
Firm/Company

457 Laurence Dr #525

\_\_\_\_\_  
Address

Heath, Texas 75032

\_\_\_\_\_  
City/State and Zip Code

jholder@motherfund.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jackie Holder

214

803-5280

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Enclosed is a check for the following amount:**

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Rockwall Capital LLC
2. (a) Rockwall Capital LLC (b) Rockwall Capital LLC
- Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)
- 5832 South State Highway 205 457 Laurence Dr #525
- Rockwall TX 75032 Heath Texas 75032
- 10/05/2007 L07000101739
3. Date of filing/registration in Florida 4. Document number

5. (a) Umbach Financial Group LLC
- Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- 525 S Flager Drive Suite 100
- Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

W Palm Beach, FL 33401

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Corporation Service Company

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Jason Bishop, CEO

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Joia Shane  
Signature of Registered Agent