

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000024020

Entity Name: THE SPLIT GROUP LLC

**FILED**  
**Jun 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1172 S DIXIE HWY STE 580  
SUITE #580  
CORAL GABLES, FL 33146 US

**New Principal Place of Business:**

**Current Mailing Address:**

1172 S DIXIE HWY STE 580  
SUITE #580  
CORAL GABLES, FL 33146 US

**New Mailing Address:**

FEI Number: 27-5155509

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DARJI, MEHAL  
1172 S DIXIE HWY STE 580  
SUITE #580  
CORAL GABLES, FL 33146 US

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

ROCKEFELLER, MEHAL  
1172 S DIXIE HWY STE 580  
SUITE #580  
CORAL GABLES, FL 33146 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: MEHAL ROCKEFELLER

06/12/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ROCKEFELLER, MEHAL  
Address: 1172 S DIXIE HWY STE 580  
City-St-Zip: CORAL GABLES, FL 33146 US

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: MEHAL ROCKEFELLER

MGR

06/12/2012

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