

06/29/2015

09:29

TO:18506176383 FROM:9545102072

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Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : GFB TAX SERVICE LLC
 Account Number : I20120000047
 Phone : (754)246-6160
 Fax Number : (954)510-2072

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: gastonbelen@gfbtaxservice.com

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SOLD ROCK INVESTMENT GROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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Sheila B Young
Regulatory Specialist II
Amount charged: 25.00

FAX Aud. #: H15000150712
Letter Number: 715A00013543

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet. The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file. 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.

SUBJECT: SOLD ROCK INVESTMENT GROUP LLC
REF: L15000104769

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GFB TAX SERVICE LLC

June 29, 2015



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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SOLD ROCK INVESTMENT LLC**

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GASTON F BELEN

Name of Person

GFB TAX SERVICE LLC

Firm/Company

2200 N. COMMERCE PARKWAY SUITE 200

Address

WESTON, FL 33326

City/State and Zip Code

GASTONBELEN@GFBTAXSERVICE.COM

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

For further information concerning this matter, please call:

GASTON BELEN

754

246-6160

Name of Person

at ()

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (2/14)

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TALLAHASSEE, FLORIDA

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: SOLD ROCK INVESTMENT LLC

SECOND: The Florida Document number of the limited liability company is: L15000104769

THIRD: Document to be corrected is:

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

We made a mistake in the name of the company SOLD ROCK INVESTMENT

LLC

The correct name of the company is SOLID ROCK FLORIDA INVESTMENT

GROUP LLC

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR

- ☐ The electronic transmission of the record was defective.

Signature of Authorized Representative

06-29-2015

Date

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