

L18000187905

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

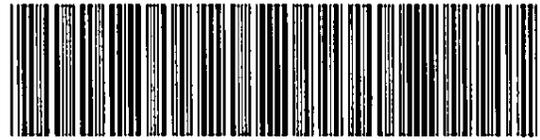
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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04/15/19--01039--004 **25.00

FILED
2019 APR 15 AM 9:15

Amend

APR 23 2019

I ALBRITTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Split Rock Capital LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Natalie Premock
Name of Person

Firm/Company

2273 Phoenix Ave
Address

DAVE, FL 33324
City/State and Zip Code

stevelevine1h@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Natalie Premock at (954) 826-5125
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Levine, Stepehn	2273 Phoenix Ave	<input type="checkbox"/> Add
		Davre, FI 33324	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Levine, Stephen	2273 Phoenix Ave	<input checked="" type="checkbox"/> Add
		Davre, FI 33324	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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