

L20000203893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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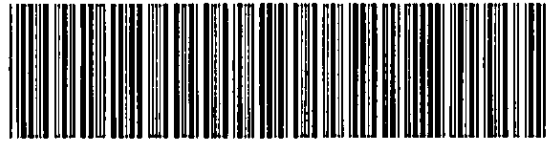
(Business Entity Name)

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JULIA A. GUNDEL

US  
05/16/21

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ION Red Rock Management, 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:

Nicole C. Smith, Esq.

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

Smith & de Lemos, PA

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

2014 Edgewater Drive, #214

\_\_\_\_\_  
Address

Orlando, Florida 32804

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

nicole@smithdelemos.com

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

2021 MAY 12 PM 2:18

For further information concerning this matter, please call:

Nicole C. Smith, Esq.

\_\_\_\_\_  
at (407) 619-2682

\_\_\_\_\_  
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 Address:**

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

**If Changing Registered Agent, Signature of New Registered Agent**

**MGR = Manager**  
**AMBR = Authorized Member**

[illegible]

1971 24 23 0

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Dated May 4 2021

**Bobbie Hirschy, Manager**

Typed or printed name of signee