

September 17, 2019

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Sent via certified mail

Top Hat Plan Exemption
Pension and Welfare Benefits Administration
Room N-5644
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, D.C. 20210

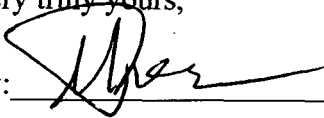
Dear Sir or Madam:

The purpose of this letter is to provide alternative single filing compliance with reporting and disclosure requirements regarding Nonqualified Top Hat Plans under Part I of Title I of ERISA. This filing is intended to comply with Department of Labor Regulations Section 2520.104-23:

- A. Name and Address of Employer: Roaring Fork LLC, 241 N. Broadway, Suite 501, Milwaukee, WI 53202
- B. Employer Identification Number: 39-1917008
- C. Roaring Fork LLC maintains the following plan for a select group of management or highly compensated employees:
 - 1. Roaring Fork LLC Nonqualified Deferred Compensation Plan
Number of Participants: 1

In accordance with Section 104(a)(1) of ERISA, the Employer will provide Plan documents to the Secretary of Labor upon request.

Very truly yours,

By: 

Name: Michael Franke

Title: member


ROARING FORK
RESTAURANT GROUP
241 N. BROADWAY, SUITE 501
MILWAUKEE, WI 53202

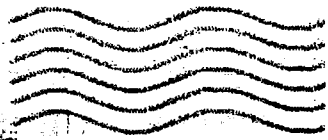
CERTIFIED MAIL



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Post Office
Milwaukee WI 53202
09/17/2019
02:00 PM (GMT-05:00)

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Washington, DC 20210

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Date:

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