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SECRETARY OF STATI



J. BRYAN

JUN 25 2010

EXAMINER

COVER LETTER

	ation Section n of Corporations		
SUBJECT:	SIIVER I	-NVes + MENTS Limited Liability Company)	22
The enclosed A	ticles of Dissolution and fee(s) are su	abmitted for filing.	
Please return all	correspondence concerning this matte	er to the following:	
	CAROL	G NOBLE	
		(Name of Person)	\ ` .
			PS 6
		(Firm/Company)	AR S
	239 Cle	AR BROOK TRAI	ASSE ASSE
	Douglas (Cit	AR BROOK TRAIN (Address) U, 1/2 GA 30/3 ty/State and Zip Code)	PH 3: 00 PH 3: 00
For further infor	mation concerning this matter, please	call:	
_0	AROI NOBLE (Name of Person)	at (770) 949 (Area Code & Daytime Teleph	2827 one Number)
Enclosed is a chec	k for the following amount:		
\$25.00 Filing F	30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	50.00 Filing Fee, ificate of Status & ified Copy litional copy is enclosed)
	MAILING ADDRESS:	STREET/COURIER	ADDRESS:
	Registration Section Division of Corporations	Registration Section Division of Corporation	ons
	P.O. Box 6327	Clifton Building	

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 4, 2010

CAROL G NOBLE 239 CLEAR BROOK TRAIL DOUGLASVILLE, GA 30134

SUBJECT: SILVER INVESTMENTS, LLC

Ref. Number: M0400005409



We have received your document for SILVER INVESTMENTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 410A00011045

COVER LETTER

Division of 0				•
SUBJECT:	5, LVer (Name of For	INVESTNE reign Limited Liability C	ompany)	<u>/</u>
Dear Sir or Madam:				
The enclosed withdra	wal and fee(s) are submitte	ed for filing.		
Please return all corre	espondence concerning this	matter to the following:		
CAROL	G. NOBLE (Name of Person)	<u> </u>		ري والاشتخاص المساودوسات
5, Iver	INVest /	nents Lec	<u>-</u>	FILE 10 JUN 24 I SECRETARY
239 Doug	Clear Br (Address) /ASVIIIe (City/State and Zip Cook	COOK TRAIL A 30/34		PN 3: 00 Y OF STATE EE. FLORIDA
For further information	on concerning this matter, p G. NOBUE nme of Person)	please call:		27 (ber)
Registration Division of Clifton Buil 2661 Execu	Corporations	Registr Divisio P.O. Be	ation Section on of Corporations ox 6327 assee, 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 State Certified Copy	us &

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SILVER INVESTMents, LCC (Name of limited liability company)
(Name of minica natinty company)
·
(Jurisdiction of its organization)
(Florida Document Number)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.
239 Clean Brook TRAIL. (Mailing address)
(Maning address)
Douglas VIIIe G-A 301311 (City/State/Zip)
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
_ Carol & noble
(Signature of member or authorized representative of a member)
CAROL G NOBLE
(Typed or printed name of signee)

Filing Fee: \$25.00