# B1000000177

(Requestor's Name)
(Address)
(Address)
(City (Chate 77 in (Discuss 4))
(City/State/Zip/Phone #)
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EXAMINER

#### **COVER LETTER**

Division of Co	orporations							
	SILVER LIN						-	
Name of Limited Partnership or Limited Liability Limited Partnership  DOCUMENT NUMBER: B1000000177								
The enclosed Stateme fee(s) are submitted fe		legistered (	Office and	l/or Regi	stered Agent a	and		
Please return all corre	espondence concer	ning this r	natter to:					
N	IICHAEL LAPAT							
	Contact Person			-				
LAW OFFI	CES OF MICHAI	EL LAPA	Γ					
	Firm/Company			•				
3300 UNIVE	RESITY DRIVE,	SUITE 3	11					
	Address	<del></del>		•				
CORA	L SPRINGS FL	33065				A	な	
Cit	ty, State and Zip Code	;		•		2-2	MAR	
julieh	@turnkeyhedge	funds.cor	n				<b>70</b>	
E-mail address: (to b	oe used for future anni	ual report no	tification)			S	GQ.	<u> </u>
For further information	on concerning this	matter, ple	ease call:			E 75		ED
JULIE H	ANCOCK	at (_	954	)	345-6442	PRI A	<b>30</b> 77	
Name of Contac	t Person	\ <u>A</u>	rea Code an	d Daytime	Telephone Nun	nber	' <b>*</b>	

Enclosed is a \$35.00 check made payable to the Florida Department of State.

### STREET ADDRESS:

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

Registration Section

TO:

### MAILING ADDRESS:

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

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

	ER LINING ASSET					
2. 11-04-	2010	3.	B100000	)00177		
Date of filing/registra	ation in Florida		Florida docume	nt number		
4. The name of the registered Department of State:	l agent and the registered offic	e address as	shown on the re	ecords of the Florida		
	JEREMY SALS	BURG				
	Name					
	1020 SE 13TH T	ERRACE				
	Address					
	FORT LAUDERDAL	E FL 333	16			
	City, State and	Zip		E.C.	=	
5. The name and Florida stree	et address of the new registere	d agent and/	or office:		2 MAR	
	JEREMY SALS	BURG		<b>3</b>	₹0  }}	
	Name			<b>3</b> 22	150 160	
	433 PLAZA REAL,	SUITE 27	'5		3	П
	Florida street address (P.O. B	ox not accep	table)	11.5 11.5 11.5	150	
	<b>BOCA RATON</b>	FL	33432		7	
	City, State and	Zip				
6. Such change(s) is/are effec	tive when filed by the Florida	ı Department	of State.			
Signature of General Partner	JEREMY SALSBURG, M	MANAGER	OF GENERAL	PARTNER,		
11	SILVER LINING ASSI	ET MANAG	EMENT, LLC	3		
t hereby sccept the appointment of the comply with the provisions of	ent as registered agent and ag all statutes relative to the pro	ree to act in per and com	this capacity. I plete performan	further agree to ace of my duties,		
and cam familiar with an asc	ept the obligations of my posi-	tion as regisi	tered agent.	,		
Jan 19 19 19 19 19 19 19 19 19 19 19 19 19	The same of the sa					
Signature of Registered Agent	JEREMA SALSBURG					
Filing Foo	¢35 AA					

Certified Copy (optional): \$52.50