

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 20, 2008 8:00 am
Secretary of State

06-20-2008 90113 010 ***138.75

DOCUMENT # L06000106765

1. Entity Name
SILVERBACK GROUP, LLC



Principal Place of Business
**133 OLIVERA WAY
PALM BEACH GARDENS, FL 33418**

Mailing Address
**133 OLIVERA WAY
PALM BEACH GARDENS, FL 33418**

2. Principal Place of Business - No P.O. Box #
239 Via Palacio
Suite, Apt. #, etc.

3. Mailing Address
239 Via Palacio
Suite, Apt. #, etc.



05212008 Chg-LLC CR2E083 (12/06)

City & State
Palm Beach Gardens, FL
Zip
33418
Country
USA

City & State
Palm Beach Gardens, FL
Zip
33418
Country
USA

4. FEI Number
NOT APPLICABLE
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**LABONTE, CHAD P
133 OLIVERA WAY
PALM BEACH GARDENS, FL 33418**

7. Name and Address of New Registered Agent

Name
Chad P. Labonte

Street Address (P.O. Box Number is Not Acceptable)
239 Via Palacio

City **Palm Beach Gardens** **FL** Zip Code **33418**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **3/27/08**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
LABONTE, CHAD P
133 OLIVERA WAY
PALM BEACH GARDENS, FL 33418** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

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☐ Delete

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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
239 Via Palacio
Palm Beach Gardens, FL 33418** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
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CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: **3/27/08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #