

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000039836

Entity Name: SELIDA LLC

FILED
Jul 10, 2009
Secretary of State

Current Principal Place of Business:

VANTERPOOL PLAZA, 2ND FLOOR
WICKHAMS CAY I, ROAD TOWN, TORTOLA
BRITISH VIRGIN ISLANDS, XX

New Principal Place of Business:

VANTERPOOL PLAZA, 2ND FLOOR
WICKHAMS CAY I, ROAD TOWN,
TORTOLA, BV 0000 XX

Current Mailing Address:

1200 NORTH MARKET STREET, SUITE 808
WILMINGTON, DE 19801

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FLORIDA FILING & SEARCH SERVICES, INC.
155 OFFICE PLAZA DRIVE, SUITE A
TALLAHASSEE, FL 32301 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ASPLANATO, GILBERT
Address: 7 BLVD. DES MOULINS, MONTE CARLO PALACE
City-St-Zip: MC 98000 MONACO, XX

Title: MGR () Delete
Name: UDRY, ALAIN
Address: 1 RUE DE HESSE, CH-1204
City-St-Zip: GENEVA, SWITZERLAND, XX

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ASPLANATO, GILBERT

MGR

07/10/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date