L11000030421

(Requestor's Name)	
(Address)	90019697
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	03/09/1101007
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
A. LUNT	
MAR 11 2010	
FXAMINER	

Office Use Only



7979

'--006 **125.00

COVER LETTER

Division of Cor			
SUBJECT: 5//	Ver Lining Con Name of Limited I	rsulting	
-	Name of Limited L	Liability Company	
The enclosed Articles of	Organization and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter t	o the following:	
And	a. Bennott	4	
	ev Bennett Na	me of Person	
Silve	er Lining Co	nsulting	
	Fir	m/Company	
1243	5 Chase G	rove Dr	2011 MAR
		Address	
Tamo	City/St. City/St. City/St. E-mail address: (to be used for fi	3626	<u>ئ</u> وَيَّارِي
	City/St.	ate and Zip Code	n Con a
andre	v. bennett, st	ca gmail.com	<u> </u>
	E-mail address: (to be used for h	uture annual report notification)	
For further information c	oncerning this matter, please cal	11:	**************************************
Andrew B	ennett at	(813) 217-	2539
Name o	f Person	Area Code & Daytime Tele	phone Number
Enclosed is a check for	r the following amount:		
\$125.00 Filing Fee	_	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	•		
The name of the Limited Liability Company Silver Lining Com (Must end with the words "Limited Li		2011 MA	n
(Must end with the words "Limited Li	iability Company, "L.L.C.," or "LLC.")		HE THE BUT
ARTICLE II - Address: The mailing address and street address of the		d Liability Company is:	
Principal Office Address:	Mailing Address:		
12435 Chase Grove Dr	same	14	
12435 Chase Grove Dr Jampa FL 33626		-	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the	egistered Agent. You must designate an i		
Andra R	•		

12435 Chase Grove Dr.

Florida street address (P.O. Box NOT acceptable)

Tampa FL 33626

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM_	Andrev Bennett Fill BR 12435 Chase Grove Thr. Tompa, FL 33626 000 PH 3:
	date of filing: (OPTIONAL)
effective date is listed, the date must b O days after the date of filing.)	e specific and cannot be more than five business days pr
REQUIRED SIGNATURE:	

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Andrew Bennett
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)