2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000134036

Entity Name: SILVER ORANGE LLC

Apr 30, 2012 Secretary of State

Date

Current Principal Place of Business: New Principal Place of Business:

17 HARVOUR ISLE DRIVE WEST, #405 17 HARVOUR ISLE DRIVE WEST FT. PIERCE, FL 34949

405

FT. PIERCE, FL 34949

Current Mailing Address: New Mailing Address:

17 HARVOUR ISLE DRIVE WEST, #405 17 HARVOUR ISLE DRIVE WEST FT. PIERCE, FL 34949

405 FT. PIERCE, FL 34949

FEI Number: 45-3987594 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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

MANAGING MEMBERS/MANAGERS:

GREENFIELD, AMIR Name:

Address: 17 HARBOUR ISLE DR. W. #PH5 City-St-Zip: FORT PIERCE, FL 34949

Title: MGRM Name: MORAN, DANI

Address: 17 HARBOUR ISLE DRIVE WEST, #405

City-St-Zip: FT. PIERCE, FL 34949

Title: MGRM

SHMUELOV, SHLOMO Name:

17 HARBOUR ISLE DRIVE WEST, #405 Address:

City-St-Zip: FT. PIERCE, FL 34949

Title: MGRM Name: LEVIT, DANIEL

17 HARBOUR ISLE DRIVE WEST, #405 Address:

City-St-Zip: FT. PIERCE, FL 34949

Title: MGRM

Name: SHARON, RAMI

17 HARBOUR ISLE DRIVE WEST, #405 Address:

City-St-Zip: FT. PIERCE, FL 34949

Title: MGRM ALTER, KOBI Name:

Address: 17 HARBOUR ISLE DRIVE WEST, #405

FT. PIERCE, FL 34949 City-St-Zip:

I hereby 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 Statues.

SIGNATURE: AMIR GREENFIELD **MGR** 04/30/2012

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