

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000000937

Entity Name: SILVER LINING, LLC

FILED  
Jan 18, 2008  
Secretary of State

## Current Principal Place of Business:

2935 SW 22ND. AVE.  
STE 106, BLDG. 19  
DELRAY BEACH, FL 33445

## New Principal Place of Business:

## Current Mailing Address:

4745 INDEPENDENCE ST.  
WHEAT RIDGE, CO 80033

## New Mailing Address:

FEI Number: 65-0783549

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SARIAN, LORI C  
2935 SW 22ND. AVE.  
STE 106, BLDG. 19  
DELRAY BEACH, FL 33445 US

## Name and Address of New Registered Agent:

SARIAN, LORI C  
2935 SW 22ND. AVE.  
STE 106, BLDG. 19  
DELRAY BEACH, FL 33445 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:

01/18/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SARIAN, LORI  
Address: 2935 SW 22ND. AVE., STE 106, BLDG. 19  
City-St-Zip: DELRAY BEACH, FL 33445

Title: MGR ( ) Delete  
Name: SARIAN, CHRIS  
Address: 2935 SW 22ND. AVE., STE 106, BLDG. 19  
City-St-Zip: DELRAY BEACH, FL 33445

## 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: CHRIS SARIAN

MGR

01/18/2008

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