

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 31, 2007 08:00 AM
Secretary of State

DOCUMENT # M04000001037

1. Entity Name
VYVX, LLC



Principal Place of Business
1025 ELDORADO BLVD.
BROOMFIELD, CO 80021

Mailing Address
1025 ELDORADO BLVD.
BROOMFIELD, CO 80021



01082007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|-----------------------------|-------------------------------|
| 4. FEI Number 75-3048078 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

UN00000612169

02/02/07-80025-013 50.00

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

| | |
|-----------------|----------------------|
| TITLE | MGR |
| NAME | STORTZ, THOMAS C |
| STREET ADDRESS | 1025 ELDORADO BLVD. |
| CITY - ST - ZIP | BROOMFIELD, CO 80021 |
| TITLE | MGR |
| NAME | O'HARA, KEVIN J |
| STREET ADDRESS | 1025 ELDORADO BLVD. |
| CITY - ST - ZIP | BROOMFIELD, CO 80021 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1-19-07

720-888-7669

Date

Daytime Phone #