

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000005021

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** SPARKLING OREGONI, L.L.C.

**Current Principal Place of Business:**

845 NE 5TH ST. #100  
MCMINNVILLE, OR 97128

**New Principal Place of Business:**

**Current Mailing Address:**

845 NE 5TH ST. #100  
MCMINNVILLE, OR 97128

**New Mailing Address:**

**FEI Number:** 91-2078778

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SELECTED BRANDS DISTRIBUTORS, LLC  
5001 NW 13TH AVE. STE L  
DEERFIELD BEACH, FL 33064 US

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

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  
**Name:** STUART, ROBERT R  
**Address:** 845 NE 5TH ST. #100  
**City-St-Zip:** MCMINNVILLE, OR 97128

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 Statutes.

**SIGNATURE:** ROBERT R. STUART

MGR

02/18/2011

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