04/03/2012

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PAGE 02/06

Florida Department of State

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Account Number : I20080000054 Phone : (949)955-9585 Fax Number : (800)562-6504

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Foreign Limited Liability Company Something Silver DW, LLC

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COVER LETTER

Registration Sect Division of Corp-		THING SILVER DW, LLC Name of Limited Liability Company Liability Company for Authorization to Transact Business in Florida,
ECT:	SOME	THING SILVER DW, LLC
	ì	Name of Limited Liability Company
		Liability Company for Authorization to Transact Business in Florida, te above referenced foreign limited liability company to transact busi
return all correspon	dence concerning this	matter to the following:
		Sophy Keo
		Name of Person
	1	NRAI Corporate Services, Inc.
- 		Firm/Company
		2875 Michelle Drive, Stc 100
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		City/State and Zip Code
		skeo@nrai.com
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rther information co	ncerning this matter, p	olease call:
Sophy Keo		at (800) 562-6429
	Name of Person	Area Code & Daytime Telephone Number
MAILING ADD		STREET ADDRESS: Division of Corporations
Division of Corp. Registration Sect		Registration Section
P.O. Box 6327		Clifton Building
Tallahassee, FL	32314	2661 Executive Center Circle Tallahassee, FL 32301
ned is a check fr	or the following an	nount:
\$125.00 Filing F		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: SOMETHING SILVER DW, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC,") Washington (Jurisdiction under the law of which foreign limited liability company is organized) 12/09/2011 (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) (Date first transacted business in Florida, If prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 19500 Ballinger Way NE, Ste 200 Shoreline, WA 98155 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 🔽 9. The name and usual business addresses of the managing members or managers are as follows: Cheryl L. Swan, Manager, 19500 Ballinger Way NE, Suite 200, Shoreline, WA 98155 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Retail sales of jewelry Signature of emember or an authorized representative of a member. (in accordance with section 608,408(3), F.S., 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.) Cheryl L. Swan, Manager

Typed or printed name of signee

04/03/2012 13:55

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	the Limited Liability Co	mpany is:		
SOMETHING	SILVER DW, LLC			
If unavailable, th	ne alternate to be used in	the state of Florida	is:	
2. The name and	d the Florida street addre	ss of the registered	agent and office are;	
]	NRAI Services, Inc.		
		(Name)		_
	5.	15 East Park Avenu	e	
,	Florida Street A	Address (P.O. Box NO	[ACCEPTABLE)	
	Tallahassee	FL	32301	
•		City/\$tate/Zip		
liability company agent and agree i relating to the pro	ned as registered agent and at the place designated to act in this capacity. I find a per and complete perform position as registered ag	n this certificate, I he arther agree to comp mance of my duties, ent as provided for i	ereby accept the appo ly with the provisions and I am familiar with	intment as registered of all statutes and accept the la Statutes.
-	(Si	gnature)		
	\$ 100.6 \$ 25.0 \$ 30.0 \$ 5.0	Designation of October 10 October	Registered Agent	

WIL.



Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its scal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF SOMETHING SILVER DW, LLC

I FURTHER CERTIFY that the records on file in this office show that the above named Limited Liability Company was formed under the laws of the State of WA and was issued a Certificate Of Formation in Washington on 12/9/2011.

I FURTHER CERTIFY that as of the date of this certificate, SOMETHING SILVER DW, LLC remains active and has complied with the filing requirements of this office.

Date: March 29, 2012

UBI: 603-175-802



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Sccretary of State