PG 1710

Doc ID: 007108550001 Type: PTR Recorded: 10/09/2013 at 03:55:22 P Fee Amt: \$12.00 Page 1 of 1 Fauguier County, VA Gail H Barb Clerk of Circuit Court File# 2013-00000210

CERTIFICATE OF ASSUMED OR FICTITIOUS NAME

Commonwealth of Virginia This is to certify that the below named person, partnership, limited liability company or corporation intends to conduct or tra

		ness under an assumed or fictitious name in the [] City [X] County of Warrenton					
1.		SSUMED OR FICTITIOUS NAME of business					
2.	Silver Co	Cup Estates HOA pove business is owned by the following entity type:					
۷.		OLE PROPRIETORSHIP (Complete A below) [] PARTNERSHIP (Complete B below)					
		IMITED LIABILITY COMPANY (Complete C below) [X] CORPORATION (Complete C below).					
	A	NAME OF OWNER:					
		RESIDENCE ADDRESS					
		POST OFFICE ADDRESS					
	В.	NAME OF PARTNERSHIP					
		OFFICE ADDRESS					
		POST OFFICE ADDRESS					
	domestic Corporat (3) Is the business Commis	a general partnership? [] NO [] YES. If YES, complete the Statement of Partners on Page Two of Two. Is a cic limited partnership? [] NO [] YES. If YES, a certified copy of this certificate must be filed with the Station Commission. Va. Code § 59.1-70. This a foreign limited partnership? [] NO [] YES. If YES, indicate the date of the certificate of registration is in the Commonwealth of Virginia issued by the State Corporation ssion:	te				
	C.	NAME OF [X] CORPORATION [] LIMITED LIABILITY COMPANY					
		Silver Cup Homeowners Association, Inc.					
		OFFICE ADDRESS 59 Culpeper Street, Warrenton, VA 20186					
	(1)	POST OFFICE ADDRESS					
	(1)	A corporation or limited liability company must file a certified copy of this certificate with the State Corporation Commission. Va. Code§ 59.1-70.					
	(2)	Is this a foreign corporation or a foreign limited liability company? [X] NO [] YES. If YES, indicate the dat certificate of authority/registration to transact business in the Commonwealth of Virginia issued by the State Commission:	te of the orporation				
			2				
		ACKNOWLEDGMENT	77				
Ιc	ertify tha	at the foregoing is true and correct to the best of my knowledge and belief	ž.				
			S				
			9				
		N 13	-				
		1.1	0				
Corporat	ion	Randy Anderson NAME OF PRESIDENT Randy Anderson NAME OF PRESIDENT	[1]				
[] City	County	cknowledged before me, this 2 day of Dotokok , 2013.					
Subscribe	d and asi	state commonwealth of the first the state of					
Subscribe	and aci	cknowledged before me, this 2 day of Dotokoek, 2013.					
(Ja	NAME	Director of Information of Director of International South Since					
My comr	nission ex	Expires Jan 31, 2014 []CLERK/DEPUTY CLERK M NOTARY PUBLIC					
		Registration No					

VIRGINIA: IN THE CLERK'S OFFICE OF THE CIRCUIT COURT FOR THE COUNTY OF FAUQUIER,

This instrument was this day received in said Office and with certificate admitted to record at 3.55 p.m.

TESTE: Bal &Barb, CLERK

CYNTHIA ELIZABETH GALE NOTARY PUBLIC COMMONWEALTH OF VIRGINIA

Is	s this a general partnership? [] N	O [] YES. If YES, complete the St	atement of Partners on Page 1 wo of 1 wo. 18 tills a y of this certificate must be filed with the State		
C (3 b	forporation Commission. Va. Co B) Is this a foreign limited partne usiness in the Commonwealth of	de 8 59.1-70.	icate the date of the certificate of registration to transact		
A	Commission: A certified copy of this certificate	must be filed with the State Corporation	on Commission. Va. Code § 59.1-70.		
C	NAME OF [X] CORPORATION [] LIMITED LIABILITY COMPANY				
	Silver Cup Ho	meowners Association, Inc. 59 Culpeper Street, Warrenton, V	/A 20186		
	POST OFFICE ADDRE	ESS	copy of this certificate with the State Corporation		
(A corporation or limited Commission. Va. Code 		copy of this certificate with the State Corporation		
(gistration to transact business in the Co	y? [X] NO [] YES. If YES, indicate the date of the mmonwealth of Virginia issued by the State Corporation		
		ACKNOWLEDGM	ENT		
I cei	rtify that the foregoing is true and	correct to the best of my knowledge			
0		-	1 0 3 / 3		
Corporation	on <u>Randy Anderson</u> NAME OF PR	ESIDENT SIG	NATURE OF PRESIDENT		
[] City vi	County of Pauguor	State/Commonwealth c	/		
	d and acknowledged before me, th		,2013		
12	AGA Atadosi (Fail	1 Division	CHarling in a large		
- Ch	NAME (AND INC.	Director of	TITLE TITLE		
My comm	ission expires Tan 31, Z	014 LICLERKID	EPUTY CLERK M NOTARY PUBLIC		
y comm	institution expires				
		Registration N	No. 736566		
			· ·		
FOR THE	A: IN THE CLERK'S OFFICE (E COUNTY OF FAUQUIER,	0.00			
		OCT - 9 2013	CYNTHIA ELIZABETH GALE		
with cert	strument was this day receive ificate admitted to record at	ed in said Office and	NOTARY PUBLIC		
		A Comment of the Comm	COMMONWEALTH OF VIRGINIA		
TESTE:	Sail HBarb	CLERK	The state of the s		
	L'				
********			TO PROPERTY.		
			•		
		I certify that the documen	t to which this authentication is affixed is a		
		true copy of a record in th	e Fauquier County Circuit Court, Virginia,		

that I have custody of the record, and that I am the custodian of the record.

Gail H. Barb, Clerk

Deputy Clerk