



**WASHINGTON**  
**Secretary of State**  
**Corporations & Charities Division**

Filed  
Secretary of State  
State of Washington  
Date Filed: 08/28/2024  
Effective Date: 08/28/2024  
UBI #: 602 540 953

## EXPRESS ANNUAL REPORT WITHOUT CHANGES

### BUSINESS INFORMATION

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Business Name:

**SILVER OAK APARTMENTS, LLC**

UBI Number:

**602 540 953**

Business Type:

**WA LIMITED LIABILITY COMPANY**

Business Status:

**ACTIVE**

Principal Office Street Address:

**600 UNIVERSITY ST STE 2018, SEATTLE, WA, 98101, UNITED STATES**

Principal Office Mailing Address:

**600 UNIVERSITY ST STE 2018, SEATTLE, WA, 98101, UNITED STATES**

Expiration Date:

**09/30/2025**

Jurisdiction:

**UNITED STATES, WASHINGTON**

Formation/Registration Date:

**09/20/2005**

Period of Duration:

**PERPETUAL**

Inactive Date:

Nature of Business:

**REAL PROPERTY INVESTMENT**

REGISTERED AGENT [RCW 23.95.410](#)

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Registered Agent Name	Street Address	Mailing Address
SEL INC	1420 FIFTH AVE STE 3000, SEATTLE, WA, 98101-2393, UNITED STATES	1420 FIFTH AVE STE 3000, SEATTLE, WA, 98101-2393, UNITED STATES

### GOVERNORS

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Title	Type	Entity Name	First Name	Last Name
GOVERNOR	ENTITY	METROPOLITAN INVESTMENTS, L.L.C.		

## CONTROLLING INTEREST

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1. Does this entity own (hold title) real property in Washington, such as land or buildings, including leasehold improvements?

- **Yes**

2. In the **past 12 months**, has there been a transfer of at least 16-2/3 percent of the ownership, stock, or other financial interest in the entity?

- **No**

a. If "Yes", in the **past 36 months**, has there been a transfer of controlling interest (50 percent or greater) of the ownership, stock, or other financial interest in the entity?

- **No**

3. If you answered "Yes" to question 2a, has a controlling interest transfer return been filed with the Department of Revenue?

- **No**

You **must** submit a Controlling Interest Transfer Return form if you answered "yes" to questions 1 **and** 2a.

Failure to report a Controlling Interest Transfer is subject to penalty provisions of [RCW 82.45.220](#).

For more information on **Controlling Interest**, visit [www.dor.wa.gov/REET](http://www.dor.wa.gov/REET).

## CONFIRMATION EMAIL ADDRESS

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Note: Please enter in the email address you would like confirmation sent of this annual report and payment receipt.

Email Address:

**SEL@STOKESLAW.COM**

## EMAIL OPT-IN

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By checking this box, I hereby opt into receiving all notifications from the Secretary of State for this entity via email only. I acknowledge that I will no longer receive paper notifications.

## AUTHORIZED PERSON

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Person Type:

**ENTITY**

First Name:

**KAREN**

Last Name:

**STEWART**

Entity Name:

**SEL, INC.**

Title:

**SECRETARY**



This document is hereby executed under penalty of law and is to the best of my knowledge, true and correct.