FORM D RECEIVED

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:	April 30, 2008					
Estimated average burden						
hours per respons	se16.00					

SEC USE ONLY

UNIFORM LIMITED OFFERING EXEMPTION	_
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Shares of stock in FVP Overseas, Ltd.	
Filing under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6) ☐ ULOE Type of Filing: ☐ New Filing ☒ Amendment	
A. BASIC IDENTIFICATION DATA	_
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) FVP Overseas, Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Ogier Fiduciary Services (Cayman) Limited Queensgate House, 113 South Church Street P.O. Box 1234GT Grand Cayman, KY1-1108 Cayman Islands Telephone Number (Aguicing Area Code) N/A AUG 3 1 2007 THOMSON	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Incident Area Code) (if different from Executive Offices)	_
Brief Description of Business Company engaged in seeking capital appreciation through investment.	
Type of Business Organization Corporation Dimited partnership, already formed Dimited partnership, already formed Dimited partnership, to be formed Company Dimited partnership, to be formed	
Actual or Estimated Date of Incorporation or Organization: MONTH YEAR	

General Instructions

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two- letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on the ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number

Ν

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

		The state of the s			
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Firefly Value Partners, I					· <u></u>
Full Name (Last name first, i	f individual)				
237 Park Avenue, 9 th Fl					
Business or Residence Add	ress	(Number and Street, City, Sta	ate, Zip Code)		
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Warszawski, Ariel					
Full Name (Last name first, i	f individual)				
clo EVP GP LLC 237 P	ark Avenue 9 th F	loor, New York, New Yor	rk 10017		
Business or Residence Add		r and Street, City, State, Zip			
	, , , , , , , , , , , , , , , , , , ,		,		
0 15 () 1 1			· · · · · · · · · · · · · · · · · ·		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner
Bree, David					Managing Carator
Full Name (Last name first, i	f individual)				
-l- dus- 11	Ad DO Day 240	10 Asabaahaallaaa 20	Connecte Class Connecte C	IOV4 420	O. Carrera Interneta
Business or Residence Add		r and Street, City, State, Zip (Octob	ayman K 11-120	6, Cayman Islands
business of Nesiderice Addi	ess (Numbe	r and Street, Oity, State, Zip	code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Hanson, Roger H. Full Name (Last name first, i	if individual)				
t dii Name (Last name iiist, i	i ilidividual)				
		10, Ansbacher House, 20	Genesis Close, Grand C	ayman KY1-120	8, Cayman Islands
Business or Residence Add	ress (Numbe	r and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
					Managing Farmer
Full Name (Last name first, i	f individual)				
D. C D. C A L.	(\$1.1.	10: : 0:: 0: : 7:			
Business or Residence Add	ress (Numbe	r and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or
					Managing Partner
Full Name (Last name first, i	if individual)				, .
Tur Name (Last name mst, i	i iliaiviadai)				
Business or Residence Adda	ress (Numbe	r and Street, City, State, Zip	Code)		
	(Use blank s	heet, or copy and use additio	nal copies of this sheet, as neo	cessary.)	

B. INFORMATION ABOUT OFFERING									
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No ⊠							
2. What is the minimum investment that will be accepted from any individual?	. \$ <u>1,000,0</u>	<u>00</u>							
3. Does the offering permit joint ownership of a single unit?	Yes ⊠	No							
. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchases in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.									
Full Name (Last name first, if individual)									
N/A									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Name of Associated Broker or Dealer									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	☐ All Stat	tes							
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FI] [GA] [GA] [IL] [MI] [MI]	[HI]	[ID]							
Full Name (Last name first, if individual)									
N/A									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Name of Associated Broker or Dealer									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	☐ All St	tates							
[AL]	[HI]								
L	[MS]	(MO) [(PA) [(PR) [
Full Name (Last name first, if individual)	1	<u>, , , , , , , , , , , , , , , , , , , </u>							
N/A									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Name of Associated Broker or Dealer									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	. DAII S	tates							
[AL]	[HI]	[ID]							

Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. **Amount Already** Aggregate Offering Price Sold Type of Security Debt \$0 \$0 Equity.... \$0 \$0 ☐ Common ☐ Preferred **\$0** \$0 \$4,650,000 \$<u>0</u> \$0 \$200,000,000 \$4,650,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate Aggregate the number of persons who have purchased securities and the aggregate dollar amount of their **Dollar Amount** Number of purchases on the total lines. Enter "0" if answer is "none" or "zero." of Purchases Investors 3 \$4,650,000 0 \$0 N/A \$<u>N/A</u> Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of **Dollar Amount** Security Sold Type of offering N/A N/A N/A N/A N/A N/A N/A N/A 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. \$2,500 Printing and Engraving Costs..... ... \$34,000 .*....* \$0 \$<u>5,000</u> Other Expenses (identify) Various blue sky filing fees

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold.

C. C	FFERING PRICE, N	IUMBER OF INVESTORS, E	XPENSES AND	USE (F PROCEEDS	
tion 1 and total expenses	s furnished in respor	e offering price given in response to Part C - Question 4.a.	This difference is	\$		\$ <u>199,928,500</u>
Indicate below the amount for each of the purposes s check the box to the left of gross proceeds to the issu	Payments to Officers, Directors, &	Payments To				
Salaries and fees.					Affiliates \$	Others
Purchase of real e	state				\$	\$
Purchase, rental of	or leasing and installa	ation of machinery and equip	ment		\$	\$
	-	gs and facilities			\$	\$
offering that may b	e used in exchange	the value of securities involve for the assets or securities of	fanother		\$	\$
Repayment of inde	ebtedness				\$	\$
Working capital					\$	⊠ \$ <u>199,928,500</u>
Other (specify):					\$	□ \$
				. \square	\$	□ \$
Column Totals					\$	⊠ \$ <u>199,928,500</u>
Total Payments Lis	sted (column totals a	ndded)			⊠ \$ <u>199,928</u>	<u>3,500</u>
		D. FEDERAL SIGNA	TURE			
following signature constitut	tes an undertaking b	ned by the undersigned duly y the issuer to furnish to the U the issuer to any non-accredi	J.S. Securities ar	nd Exc	hange Commiss	ion, upon written
Issuer (Print or Type)		Signature		Date_		
5VD 0				81:	23/07	
FVP Overseas, Ltd. Name of Signer (Print or Ty	pe)	Title of Signer (Print or Type	<u> </u>			
Ariel Warszawski	100	Director of Issuer			<u></u>	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E OTATE GIONATURE								
		E. STATE SIGNATURE								
1.	. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any disqualification provisions of such rule?									
	See Appendix, Column 5, for state response.									
2.	The undersigned issuer hereby undertakes to full Form D (17 CFR 239.500) at such times as requ		or of any st	ate in which this notice is	filed, a r	notice on				
3.	The undersigned issuer hereby undertakes to fu issuer to offerees.	rnish to the state administrato	ors, upon w	ritten request, information	furnishe	ed by the				
4.	. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
	he issuer has read this notification and knows the ndersigned duly authorized person.	contents to be true and has d	luly caused	this notice to be signed of	on its bel	half by the				
ls	suer (Print or Type) Signar	Tuye		Date						
F۱	VP Overseas, Ltd.			8/23/07						
Na	ame of Signer (Print or Type) Title o	of Signer (Print or Type)								

Director of Issuer

Instruction:

Ariel Warszawski

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2	2	3 4						
	Intend to non-ad investors (Part B	in State	Type of Security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Share	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
ΑZ									
AR									
CA									
со							·		
СТ									
DE									
DC									
FL									
GA	!							<u> </u>	-
НІ									
ID									
IL									
IN							. =.=		
IA									
KS									
KY								<u> </u>	
LA						ļl			
МЕ									
MD									
MA							=		
MI		ļ			<u> </u>				<u> </u>
MN									
MS									
МО					7 of 8				

APPENDIX

1	Intend to non-ac investors (Part B-	to sell credited in State	3 Type of Security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			Type of investor and amount purchased in State expected (Part C-Item 2) expected grant grant expected grant grant grant expected expected grant grant expected grant gra		Disqualification under State Ul Type of investor and (if yes, attact amount purchased in State explanation of w		ification ate ULOE attach n of waiver
State	Yes	No	Share	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
MT							•				
NE						-					
NV											
NH											
NJ				-							
NM											
NY		Х	200,000,000	1	150,000	0	0		х		
NC									ļ <u>.</u>		
ND											
ОН											
ок											
OR		İ									
PA		Х	200,000,000	1	1,500,000	0	0		х		
RI									-		
sc											
SD											
TN											
TX	· · · 					_		<u> </u>	<u> </u>		
UT								ļ			
VT											
VA								<u></u>			
WA		Х	200,000,000	1	3,000,000	0	0		X		
WV							 				
WI											
WY											
PR					· · · · · · · · · · · · · · · · · · ·			<u> </u>			

EXHIBIT A

FVP Overseas, Ltd. ("Fund") is a Cayman Islands exempted company that was organized for the purpose of investing and trading in a wide variety of securities, financial instruments and other assets and investments, domestic and foreign, of all kinds and descriptions, whether publicly traded or privately placed, including, without limitation, privately issued and publicly traded common stocks, privately negotiated equity and equity-related investments in publicly traded and privately held companies, exchange-traded funds, preferred stock, stock warrants, options and rights, bonds, debentures, convertible securities and money market obligations. The Fund's minimum investment amount is \$1,000,000, although Firefly Value Partners, LP ("Investment Manager") has discretion to accept lesser amounts. The shares of stock will be offered in the sole discretion of the Investment Manager. Although there is no maximum or minimum aggregate amount of the shares of stock which may be sold in this continuous offering, we have inserted the figure of \$200,000,000 in Part C(1) of Form D as a reasonable estimate of the aggregate offering price of such shares of stock.

