

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000044984

**FILED**  
**Feb 02, 2013**  
**Secretary of State**  
**CC4411810951**

**Entity Name:** AIR AND GROUND TECHNOLOGIES, LLC

**Current Principal Place of Business:**

1879 FARM WAY  
MIDDLEBURG, FL 32068

**Current Mailing Address:**

1879 FARM WAY  
MIDDLEBURG, FL 32068

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: Yes**

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

ANASTAS, PABLO  
1879 FARM WAY  
MIDDLEBURG, FL 32068 US

*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

**Authorized Person(s) Detail :**

Title MGR  
Name ANASTAS, PABLO  
Address 1879 FARM WAY  
City-State-Zip: MIDDLEBURG FL 32068

Title MGRM  
Name ANASTAS, PABLO  
Address 1879 FARM WAY  
City-State-Zip: MIDDLEBURG FL 32068

Title MGR  
Name ANASTAS, CARLOS  
Address 1885 FARM WAY  
City-State-Zip: MIDDLEBURG FL 32068

Title MGRM  
Name ANASTAS, CARLOS  
Address 1885 FARM WAY  
City-State-Zip: MIDDLEBURG FL 32068

Title MGR  
Name ANASTAS, MARTHA  
Address 1879 FARM WAY  
City-State-Zip: MIDDLEBURG FL 32068

Title MGRM  
Name ANASTAS, MARTHA  
Address 1879 FARM WAY  
City-State-Zip: MIDDLEBURG FL 32068

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: PABLO ANASTAS**

**MANAGER**

**02/02/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date