2004 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

04-16-2004 90412 043 ****50.00
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DOCUMENT # L02000019434

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SECRETARY OF STATE

1. Entity Name

MICRO AIR TESTING, LLC

Principal Place of Business	Mailing Address
5533 BILBAO PLACE SARASOTA FL 34238	5533 BILBAO PLACE SARASOTA FL 34238

2. Principal Place of Business	3. Mailing Address
8830 S TAMIAMI TRAIL	8830 S. TAMIAMI TRAIL
Suite, Apt. #, etc.: SUITE 150	Suite, Apt. #, etc.: SUITE 150
City & State: SARASOTA FL	City & State: SARASOTA FL
Zip: 34238 Country: USA	Zip: 34238 Country: USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number: 75-3078505 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TOALE, JAMES E 5533 BILBAO PLACE SARASOTA FL 34238	Name: RONALD HEAGLE Street Address (P.O. Box Number is Not Acceptable): 5533 BILBAO PLACE City: SARASOTA FL Zip Code: 34238

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Ronald J Heagle 4/9/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By September 24, 2003
MAY 1 2004

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM HEAGLE, RONALD 5533 BILBAO PLACE SARASOTA FL 34238	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 800039069408 07/13/04--01068--001 **150.00
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	REINSTATEMENT 03-04 ☐ Change ☐ Addition

CR2E-001 (4/03)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

SIGNATURE: Ronald J Heagle April 14, 2004 941-927-5842

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #