

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000001591

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** CLIMATIC TECHNOLOGIES, LLC

**Current Principal Place of Business:**

517 OLD JOLLY BAY  
FREEPORT, FL 32439 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1831  
SANTA ROSA BEACH, FL 32459 US

**New Mailing Address:**

**FEI Number:** 14-8505474 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

FALIVENE, JEFF J  
517 OLD JOLLY BAY  
FREEPORT, FL 32439 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** FALIVENE, JEFF J  
**Address:** 517 OLD JOLLY BAY  
**City-St-Zip:** FREEPORT, FL 32439 US

**ADDITIONS/CHANGES:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

**SIGNATURE:** JEFFREY J FALIVENE

OWNE

05/01/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date