2008 LIMITED LIABILITY COMPANY

Secretary of State ANNUAL REPORT 05-07-2008 90014 021 ***138.75 **DOCUMENT # L05000077570** INDOOR AIR SYSTEMS, LLC 30008**786** Principal Place of Business Mailing Addr*e*ss 2456 CANDLEWICK ST 2456 CANDLEWICK ST DELTONA, FL 32738 DELTONA, FL 32738 04102008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3259717 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HINES, JAMES P ESQ. DO NOT WRITE HINES NORMAN HINES, P.L. 315 SOUTH HYDE PARK AVENUE IN THIS SPACE **TAMPA, FL 33606** 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 SIGNATURE. Signeture, typed or printed name of registered against and side if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. ME ISBELL, JOYCELYN NAME 2455 CANDLEWICK ST STREET ADORESS CITY-ST-ZP DELTONA, FL 32738 TITLE NAME STREET ADDRESS CITY-ST-2# TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE THE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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:

TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE

STREET ADDRESS CITY-ST-ZIP

FILED Jun 05, 2008 8:00 am