

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096559

Entity Name: AIR VOLARE, LLC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

2020 W PENSACOLA STREET
SUITE # 27
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

PO BOX 2535
TALLAHASSEE, FL 323162535

New Mailing Address:

FEI Number: 20-3536137

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEONI, STEVEN M
2020 W PENSACOLA ST
SUITE 27
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

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: RUDNICK, JAMES M
Address: 226 N DUVAL ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: MGRM () Delete
Name: LEONI, STEVEN M
Address: P O BOX 7535
City-St-Zip: TALLAHASSEE, FL 32316

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: LEONI, STEVEN M
Address: P O BOX 2535
City-St-Zip: TALLAHASSEE, FL 32316

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: STEVEN M. LEONI

MGRM

04/27/2009

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