2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 02, 2008
Secretary of State

DOCUMENT# L06000045866

Entity Name: PINEAIRE, LLC

Current Principal Place of Business:

1120 FLORIDA AVENUE
700
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 950361
LAKE MARY, FL 327950361

New Mailing Address:

FEI Number: 56-2601959 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AWAD, MARK
1120 FLORIDA AVENUE
700
SANFORD, FL 32773 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: AWAD, MARK
Address: 1120 FLORIDA AVENUE
City-St-Zip: SANFORD, FL 32773

Title: MGRM ( ) Delete
Name: AWAD, ANDREW
Address: 1120 FLORIDA AVENUE
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: AWAD, MARK
Address: PO BOX 950361
City-St-Zip: LAKE MARY, FL 32795

Title: MGRM (X) Change ( ) Addition
Name: AWAD, ANDREW
Address: PO BOX 950361
City-St-Zip: LAKE MARY, FL 32795

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: MARK AWAD MGRM 04/02/2008

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