

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000054601

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: ONLINE AIR SYSTEMS, LLC

**Current Principal Place of Business:**

214 ORANGE STREET SUITE 43  
AUBURNDALE, FL 33823

**New Principal Place of Business:**

**Current Mailing Address:**

214 ORANGE STREET SUITE 43  
AUBURNDALE, FL 33823

**New Mailing Address:**

FEI Number: 20-4970912

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NEWBERN, CHRISTOPHER M  
155 AVERY DRIVE EAST  
AUBURNDALE, FL 33823 US

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

NEWBERN, CHRISTOPHER M  
924 CLASSIC VIEW DRIVE  
AUBURNDALE, FL 33823 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:

04/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PD ( ) Delete  
Name: NEWBERN, CHRISTOPHER M  
Address: 155 AVERY DRIVE EAST  
City-St-Zip: AUBURNDALE, FL 33823

**ADDITIONS/CHANGES:**

Title: PD (X) Change ( ) Addition  
Name: NEWBERN, CHRISTOPHER M  
Address: 924 CLASSIC VIEW DRIVE  
City-St-Zip: AUBURNDALE, FL 33823

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: CHRISTOPHER NEWBERN

PD

04/29/2009

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