

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000059910

Entity Name: AIR DR., LLC

**FILED**  
**Oct 21, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

5036 DR. PHILLIPS BLVD.  
STE 362  
ORLANDO, FL 32819 US

## **New Principal Place of Business:**

5036 DR. PHILLIPS BLVD.  
STE 191  
ORLANDO, FL 32819 US

## **Current Mailing Address:**

5036 DR. PHILLIPS BLVD.  
STE 362  
ORLANDO, FL 32819 US

## **New Mailing Address:**

5036 DR. PHILLIPS BLVD.  
STE 191  
ORLANDO, FL 32819 US

FEI Number: 26-0307782

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUSI, GIUSEPPA  
4645 CASON COVE DRIVE  
# 2317  
ORLANDO, FL FL US

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

LYE, ANDREW G  
4645 CASON COVE DRIVE  
# 2317  
ORLANDO, FL FL 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: ANDREW G. LYE

10/21/2010

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LYE, ANDREW G  
Address: 4645 CASON COVE DRIVE # 2317  
City-St-Zip: ORLANDO, FL 32811 US

Title: MGRM  
Name: VARGAS, MOISES D JR  
Address: 2522 SEVEN OAKS DRIVE  
City-St-Zip: SAINT CLOUD, FL 34772 US

I hereby 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: ANDREW G. LYE

MGRM

10/21/2010

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