

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000098873

**FILED**  
**Feb 17, 2012**  
**Secretary of State**

**Entity Name:** FRESHAIRE SOLUTIONS THAILAND-US LLC

**Current Principal Place of Business:**

11641 FOX HILL ROAD  
NORTH FT. MYERS, FL 33917

**New Principal Place of Business:**

**Current Mailing Address:**

11641 FOX HILL ROAD  
NORTH FT. MYERS, FL 33917

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

CIOFANI, EDWARD D PRES  
11641 FOX HILL ROAD  
NORTH FORT MYERS, FL 33917      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: MGR  
Name: CIOFANI, EDWARD D  
Address: 11641 FOX HILL RD  
City-St-Zip: NORTH FORT MYERS, FL 33917

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: EDWARD D. CIOFANI                      MGR                      02/17/2012

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