

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000076479

Entity Name: AVOXIO LLC

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8922 LAGUNA LN  
APT. #302  
CAPE CANAVERAL, FL 32920

**New Principal Place of Business:**

**Current Mailing Address:**

8922 LAGUNA LN  
APT. #302  
CAPE CANAVERAL, FL 32920

**New Mailing Address:**

FEI Number: 27-3091357

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MEISTERFELD, MICHAEL B  
8922 LAGUNA LN  
APT. #302  
CAPE CANAVERAL, FL 32920 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  
Name: MEISTERFELD, MICHAEL B  
Address: 8922 LAGUNA LN # 302  
City-St-Zip: CAPE CANAVERAL, FL 32920 US

Title: MGRM  
Name: MEISTERFELD, ANJA  
Address: 8922 LAGUNA LN # 302  
City-St-Zip: CAPE CANAVERAL, FL 32920 US

Title: MGRM  
Name: DARAK, OKTAY  
Address: BRUNNENSTR. 5 12/4  
City-St-Zip: ITZEHOE, SH 25524 DE

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: MICHAEL MEISTERFELD

MGRM

04/30/2011

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