

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000096867

FILED  
Feb 07, 2012  
Secretary of State

Entity Name: PSI AIR CONDITIONING LLC

**Current Principal Place of Business:**

8191 NW 91 TERRACE  
#3  
MEDLEY, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

8191 NW 91 TERRACE  
#3  
MEDLEY, FL 33166

**New Mailing Address:**

FEI Number: 27-3471733

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ORMAZABAL, WALTER  
8191 NW 91 TERRACE  
#3  
MEDLEY, FL 33166 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: RYAN, JOSEFINA  
Address: 8191 NW 91 TERRACE #3  
City-St-Zip: MEDLEY, FL 33166

Title: MGRM  
Name: MARTIN, CARLOS  
Address: 8191 NW 91 TERRACE #3  
City-St-Zip: MEDLEY, FL 33166

Title: MGRM  
Name: ORMAZABAL, WALTER  
Address: 8191 NW 91 TERRACE #3  
City-St-Zip: MEDLEY, FL 33166

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: JOSEFINA RYAN

MGRM

02/07/2012

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