

# 2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

**FILED**  
06 NOV -3 PM 1:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # M05000004485

1. Entity Name  
DEVLIN AIR, LLC



Principal Place of Business  
445 GRAND BAY DRIVE, #1210  
KEY BISCAVNE, FL 33149

Mailing Address  
445 GRAND BAY DRIVE, #1210  
KEY BISCAVNE, FL 33149



2. Principal Place of Business  
6278 Federal Highway 142  
Suite, Apt. #, etc.

3. Mailing Address  
6278 Federal Highway 142  
Suite, Apt. #, etc.

11012006 Chg-LLC CR2E083 (11/05)

City & State  
Fort Lauderdale, FL  
Zip 33308-1916 Country USA

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Fort Lauderdale, FL  
Zip 33308-1916 Country USA

4. FEI Number  
NOT APPLICABLE  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

**6. Name and Address of Current Registered Agent**

KACHKAR, JACK  
445 GRAND BAY DRIVE, #1210  
KEY BISCAVNE, FL 33149

**7. Name and Address of New Registered Agent**

Name  
CT Corporation System  
Street Address (P.O. Box Number is Not Acceptable)  
1200 South Pine Island Road  
City Plantation FL Zip Code 33324

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Margaret E. Routzahn*

MARGARET E. ROUTZAHN

11/12/06

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Special Assistant Secretary

Amended AR is \$50.00

Make check payable to  
Florida Department of State

**9. MANAGING MEMBERS/MANAGERS**

TITLE MGRM ☒ Delete  
NAME KACHKAR, JACK  
STREET ADDRESS 445 GRAND BAY DRIVE, #1210  
CITY-ST-ZIP KEY BISCAVNE, FL 33149

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**10. ADDITIONS/CHANGES**

TITLE MGRM ☒ Change ☐ Addition  
NAME John Anthony Devlin III  
STREET ADDRESS 6278 Federal Highway 142  
CITY-ST-ZIP Fort Lauderdale, FL 33308-1916

TITLE ☐ Change ☐ Addition  
NAME 100081773951  
STREET ADDRESS 11/14/06--01073--012 \*\*\$50.00  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

John Anthony Devlin III

Date

11/01/06 305-302-8671

Daytime Phone #