

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M96000000179

Entity Name: SERVISAIR LLC

FILED
Feb 04, 2008
Secretary of State

Current Principal Place of Business:

111 GREAT NECK ROAD
GREAT NECK, NY 11022

New Principal Place of Business:

151 NORTHPOINT DRIVE
HOUSTON, TX 77060

Current Mailing Address:

111 GREAT NECK ROAD
GREAT NECK, NY 11022

New Mailing Address:

151 NORTHPOINT DRIVE
HOUSTON, TX 77060

FEI Number: 11-3319570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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 () Delete
Name: SERVISAIR HOLDING CO, RPORATION
Address: 111 GREAT NECK ROAD, SUITE 600
City-St-Zip: GREAT NECK, NY 11022

Title: MGRM () Delete
Name: PENAUILLE HOLDING IN, C.
Address: 111 GREAT NECK ROAD, SUITE 600
City-St-Zip: GREAT NECK, NY 11022

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SERVISAIR HOLDING CO, RPORATION
Address: 151 NORTHPOINT DRIVE
City-St-Zip: HOUSTON, TX 77060

Title: MGRM (X) Change () Addition
Name: PENAUILLE HOLDING IN, C.
Address: 151 NORTHPOINT DRIVE
City-St-Zip: HOUSTON, TX 77060

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DINO G. NOTO - AUTHORIZED PERSON

MGRM

02/04/2008

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