## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000045866

Entity Name: PINEAIRE, LLC

**Current Principal Place of Business:** 

1120 FLORIDA ST # 700

SANFORD, FL 32773

## **Current Mailing Address:**

P.O. BOX 950361 LAKE MARY, FL 32795

FEI Number: 56-2601959 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

AWAD, MARK 1120 FLORIDA ST # 700 SANFORD, FL 32773 US

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

**FILED** Feb 10, 2019

**Secretary of State** 

2073954625CC

## Authorized Person(s) Detail:

Title AUTHORIZED MEMBER Title **AUTHORIZED MEMBER** 

AWAD, MARK AWAD, CAROL H Name Name PO BOX 950361 P.O. BOX 950361 Address Address

City-State-Zip: City-State-Zip: LAKE MARY FL 32795 LAKE MARY FL 32795

Title **AUTHORIZED MEMBER** 

Name AWAD, ANDREW Address P.O. BOX 950361 City-State-Zip: LAKE MARY FL 32795

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

02/10/2019 SIGNATURE: MARK AWAD **AMBR**