## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000467253

Entity Name: AIRSTRON, LLC

#### Current Principal Place of Business:

1559 SW 21ST AVE FT LAUDERDALE, FL 33312

# **Current Mailing Address:**

1559 SW 21ST AVE FT LAUDERDALE, FL 33312 US

## FEI Number: 59-2525449

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

Certificate of Status Desired: No

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

# Authorized Person(s) Detail :

Title	AMBR	Title	CFO, SECRETARY, TREASURER
Name	MSHC, INC.	Name	WULINSKY, SCOTT
Address	650 S. TRYON STREET SUITE 1000	Address	650 S. TRYON STREET SUITE 1000
City-State-Zip:	CHARLOTTE NC 28202	City-State-Zip:	CAHRLOTTE NC 28202
Title	PRESIDENT	Title	VP
Name	HAYES, LAWRENCE H	Name	PASCUCCI, JAMES M
Address	1559 SW 21ST AVE	Address	1559 SW 21ST AVE
City-State-Zip:	FT LAUDERDALE FL 33312	City-State-Zip:	FT LAUDERDALE FL 33312
Title	CEO	Title	VP, COO
Name	STEINKE, CRAIG A	Name	PONZO, ANTHONY
Name Address	STEINKE, CRAIG A 650 S. TRYON STREET SUITE 1000	Name Address	PONZO, ANTHONY 650 S TRYON STREET SUITE 1000
	650 S. TRYON STREET SUITE 1000		650 S TRYON STREET SUITE 1000
Address	650 S. TRYON STREET SUITE 1000	Address	650 S TRYON STREET SUITE 1000
Address City-State-Zip:	650 S. TRYON STREET SUITE 1000 CHARLOTTE NC 28202	Address City-State-Zip:	650 S TRYON STREET SUITE 1000 CHARLOTTE NC 28202
Address City-State-Zip: Title	650 S. TRYON STREET SUITE 1000 CHARLOTTE NC 28202 VP	Address City-State-Zip: Title	650 S TRYON STREET SUITE 1000 CHARLOTTE NC 28202 VP

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.

SIGNATURE: SCOTT WULINSKY

CFO, SECRETARY & 01 TREASURER

01/20/2022

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Jan 20, 2022 Secretary of State 5505677797CC