

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000041790

Entity Name: SOCIETE FRANCESCA LLC**Current Principal Place of Business:**950 BRICKELL BAY DR
APT. # 1711
MIAMI, FL 33131**Current Mailing Address:**P.O. BOX 160722
MIAMI, FL 33116 US**FEI Number:** 26-2497314**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MAZZONE MARANGIO, ANTONIO
950 BRICKELL BAY DRIVE
APT. 1711
MIAMI, FL 33131 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**Authorized Person(s) Detail :**

Title	MGR
Name	MAZZONE MARANGIO, GIOVANNI A
Address	950 BRICKELL BAY DRIVE, APT. # 1711
City-State-Zip:	MIAMI FL 33131
Title	MGR
Name	MAZZONE MARANGIO, JOSE
Address	950 BRICKELL BAY DRIVE, APT. # 1711
City-State-Zip:	MIAMI FL 33131

Title	MGR
Name	MAZZONE MARANGIO, ANTONIO
Address	950 BRICKELL BAY DRIVE, APT. # 1711
City-State-Zip:	MIAMI FL 33131
Title	MGR
Name	DE GREGORIO, ROXANNA
Address	2665 S. BAYSHORE DRIVE, SUITE 810
City-State-Zip:	COCONUT GROVE FL 33133

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: ANTONIO MAZZONE MARANGIO

MGR

05/30/2014

Electronic Signature of Signing Authorized Person(s) Detail_____
Date