

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000112305

**Entity Name:** THE CONCIERGE EXPERIENCE LLC

**Current Principal Place of Business:**

561 ALLENDALE RD.  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

561 ALLENDALE RD.  
KEY BISCAYNE, FL 33149

**FEI Number:** 27-2017991

**Certificate of Status Desired:** No

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

SOMARRIBA, ANA C  
750 ALLENDALE RD.  
KEY BISCAYNE, FL 33149 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 MGRM  
Name SOMARRIBA, MARIA P  
Address 561 ALLENDALE RD.  
City-State-Zip: KEY BISCAYNE FL 33149

Title MGRM  
Name SOMARRIBA, ANA C  
Address 750 ALLENDALE RD.  
City-State-Zip: KEY BISCAYNE FL 33149

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANA SOMARRIBA

**MANAGER**

**01/24/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date