

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000150170

**Entity Name:** GALAPAGOS EXPERIENCE LLC

**Current Principal Place of Business:**

2201 NW 45TH AVENUE  
COCONUT CREEK, FL 33066

**Current Mailing Address:**

2201 NW 45TH AVENUE  
COCONUT CREEK, FL 33066

**FEI Number:** 32-0478573

**Certificate of Status Desired:** No

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

MARTINEZ-MARQUEZ, CPA, PA  
6303 BLUE LAGOON DR  
200  
MIAMI, FL 33126 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:** JORGE L MARTINEZ, CPA

02/14/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name DEL ROCIO CORONEL, SILVIA  
Address 2201 NW 45TH AVENUE  
City-State-Zip: COCONUT CREEK FL 33066

*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:** SILVIA DEL ROCIO CORONEL

PRES

02/14/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date