

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000017988

FILED
Oct 04, 2007
Secretary of State

Entity Name: CONCIERGE PROPERTY SERVICES, LLC.

Current Principal Place of Business:

PO BOX 268296
WESTON, FL 33326 US

New Principal Place of Business:

18851 NE 29TH AVENUE, SUITE 900
AVENTURA, FL 33180 US

Current Mailing Address:

PO BOX 268296
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 20-4372022 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALAN B. SCHNEIDER, P.A.
18851 NE 29TH AVENUE, SUITE 900
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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: A.SCHNEIDER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RAVID, AVRAHAM
Address: PO BOX 268296
City-St-Zip: WESTON, FL 33326 US

Title: MGR (X) Delete
Name: BEKERMANN, DAVID
Address: PO BOX 268296
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: AVI RAVID

MGRM

10/04/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date