

DOCUMENT# L06000032772

Entity Name: LA DOLCE VITA CONCIERGE, LC

Current Principal Place of Business:

New Principal Place of Business:

Current Mailing Address:**New Mailing Address:**

FEI Number: FEI Number Applied For (X) ☒ FEI Number Not Applicable () ☐ Certificate of Status Desired () ☐

Name and Address of Current Registered Agent:

ROSSZ FIU CORPORATION
201 SOUTH BISCAYNE BLVD., STE. 850
MIAMI, FL 33131 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:

Electronic Signature of Registered Agent

Date _____

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GALE, SUSAN
Address: 201 SOUTH BISCAYNE BLVD., STE. 850
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN GALE MGR 04/05/2007

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