

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000081750

FILED  
Jul 20, 2009  
Secretary of State

Entity Name: FACILITY VIP CONCIERGE, LLC

**Current Principal Place of Business:**

1395 BRICKELL AVE. STE 720  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

1395 BRICKELL AVE. STE 720  
MIAMI, FL 33131

**New Mailing Address:**

1110 BRICKELL AVENUE  
SUITE 310  
MIAMI, FL 33131

FEI Number: 26-0692712      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

TAX HOUSE CORPORATION  
1100 SOUTH FEDERAL HWY 2ND FL  
DEERFIELD BEACH, FL 33441 US

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

NS CORPORATE SERVICES INC.  
1110 BRICKELL AVENUE  
SUITE 310  
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: NS CORPORATE SERVICES INC.

07/20/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SANTIAGO, ANA P  
Address: 1395 BRICKELL AVE. STE 720  
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 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: SANTIAGO

MGR

07/20/2009

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