

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000116605

FILED
Sep 05, 2013
Secretary of State

Entity Name: CONCIERGE WOMEN'S CARE, LLC

Current Principal Place of Business:

720 5TH AVENUE SOUTH
201
NAPLES, FL 34102 US

New Principal Place of Business:

1012 GOODLETTE ROAD N STE. 101
101
NAPLES, FL 34102 US

Current Mailing Address:

720 5TH AVENUE SOUTH
201
NAPLES, FL 34102 US

New Mailing Address:

1012 GOODLETTE ROAD N STE. 101
101
NAPLES, FL 34102 US

FEI Number: 61-1545801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LESKOVICH, STEVEN S
1822 BROADWAY
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

CRANDALL, BLANE M
1012 GOODLETTE ROAD N. STE. 101
SUITE 101
NAPLES, FL 34102 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: BLANE M. CRANDALL

09/05/2013

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: CRANDALL, BLANE M
Address: 1012 GOODLETTE RD NORTH STE 101
City-St-Zip: NAPLES, FL 34102

I hereby 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: BLANE M. CRANDALL

MGRM

09/05/2013

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