

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000007597

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: QUINTESSENCE MARKETING LLC

**Current Principal Place of Business:**

88005 OVERSEAS HIGHWAY  
#10-161  
ISLAMORADA, FL 33036

**New Principal Place of Business:**

**Current Mailing Address:**

88005 OVERSEAS HIGHWAY  
#10-161  
ISLAMORADA, FL 33036

**New Mailing Address:**

FEI Number: 26-1817455      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RITCHIE, MEEJA L  
210 KEY HONEY LANE  
TAVERNIER, FL 33070      US

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

SMITH, MEEJA  
210 KEY HONEY LANE  
TAVERNIER, FL 33070      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: MEEJA RITCHIE SMITH

04/22/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: RITCHIE, MEEJA L  
Address: 210 KEY HONEY LANE  
City-St-Zip: TAVERNIER, FL 33070

Title: MGR      ( ) Delete  
Name: SMITH, THOMAS  
Address: 210 KEY HONEY LANE  
City-St-Zip: TAVERNIER, FL 33070

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: SMITH, MEEJA  
Address: 210 KEY HONEY LANE  
City-St-Zip: TAVERNIER, FL 33070

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: MEEJA RITCHIE SMITH

MRS.

04/22/2009

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