

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000005274

Entity Name: SUNSET DENTISTRY, LLC

Current Principal Place of Business:

6280 SUNSET DRIVE, SUITE 404
MIAMI, FL 33143

Current Mailing Address:

6280 SUNSET DRIVE, SUITE 404
MIAMI, FL 33143 US

FEI Number: 65-1096917

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

I&A CORPORATE SERVICES, INC.
2121 S.W. 3RD AVENUE
7TH FLOOR
MIAMI, FL 33129 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	ROBINSON, MICHAEL TIII	Name	LEYTE-VIDAL, MARCO
Address	6280 SUNSET DRIVE, SUITE 404	Address	6280 SUNSET DRIVE, SUITE 404
City-State-Zip:	MIAMI FL 33143	City-State-Zip:	MIAMI FL 33143

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL ROBINSON

OWNER

01/15/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date