

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015253

Entity Name: MADENTAL LLC

Current Principal Place of Business:

530 FLORIDA AVE.
LYNN HAVEN, FL 32444

Current Mailing Address:

530 FLORIDA AVE.
LYNN HAVEN, FL 32444 US

FEI Number: 20-4346433

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

J. KARL TRUCKS, PA
405 OAK AVE
PANAMA CITY, FL 32401 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 MGRM
Name ARNOLD C. GANGWISCH, DMD, PA
Address 530 FLORIDA AVE.
City-State-Zip: LYNN HAVEN FL 32444

Title MGRM
Name GRANDENTAL, LLC
Address 530 FLORIDA AVE.
City-State-Zip: LYNN HAVEN FL 32444

Title MGRM
Name DANIEL G. MELZER, DMD, LLC
Address 530 FLORIDA AVE.
City-State-Zip: LYNN HAVEN FL 32444

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: ARNOLD C GANGWISCH

MGRM

02/03/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date