

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000005256

Entity Name: WELLS ENDODONTICS, P.L.

Current Principal Place of Business:

3757 MARYWEATHER LN
STE 101
WESLEY CHAPEL, FL 33544

Current Mailing Address:

3757 MARYWEATHER LN
STE 101
WESLEY CHAPEL, FL 33544

FEI Number: 20-8262847

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SICKLES, ROBERT E ESQ.
100 NORTH TAMPA ST.
SUITE 3500
TAMPA, FL 33602 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
Name WELLS, BRIAN T
Address 3757 MARYWEATHER LANE
City-State-Zip: WESLEY CHAPEL FL 33544

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: BRIAN WELLS

MGR

04/07/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date