## 2020 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

FILED Feb 25, 2020

**Secretary of State** 

8766525266CC

## 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 T WELLS MANAGER 02/25/2020