

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000083765

Entity Name: AMERICAN DENTAL OF FLORIDA--MARGATE, LLC

Current Principal Place of Business:

1605 N. STATE ROAD 7
STE C
MARGATE, FL 33063

FILED
Feb 12, 2019
Secretary of State
1459226216CC

Current Mailing Address:

1605 N. STATE ROAD 7
STE C
MARGATE, FL 33063 US

FEI Number: 26-3291016

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KERNS, JAMES
7219 NW 23RD ST
PEMBROKE PINES, FL 33024 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	Title	MANAGER
Name	KERNS, JAMES	Name	AZAR, DIEGO
Address	7219 NW 23RD ST	Address	730 RIVERSIDE DRIVE`
City-State-Zip:	PEMBROKE PINES FL 33024	City-State-Zip:	CORAL SPRINGS FL 33071

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: JAMES KERNS

MANAGER

02/12/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date