

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000084429

**Entity Name:** KENDALL DENTAL CONSULTING, L.L.C.

**Current Principal Place of Business:**

6852 COMPTON LANE SOUTH  
NAPLES, FL 34104

**Current Mailing Address:**

6852 COMPTON LANE SOUTH  
NAPLES, FL 34104

**FEI Number:** 27-0941267

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GARCIA, JACINTO  
6852 COMPTON LANE SOUTH  
NAPLES, FL 34104 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 GARCIA, JACINTO  
Address 6852 COMPTON LANE SOUTH  
City-State-Zip: NAPLES FL 34104

*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:** JACINTO GARCIA

**OWNER**

**02/21/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date