

2014 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L11000111432

Entity Name: DENTAL NOW OF PALM SPRINGS, LLC

Current Principal Place of Business:

3001 W. ROLLING HILLS CIRCLE
SUITE #610
DAVIE, FL 33328

Current Mailing Address:

3001 W. ROLLING HILLS CIRCLE
SUITE #610
DAVIE, FL 33328 US

FEI Number: 45-3585786

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DRENNEN, CHRISTOPHER JDMD
3001 W. ROLLING HILLS CIRCLE
SUITE #610
DAVIE, FL 33328 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 DRENNEN, CHRISTOPHER JDMD
Address 3001 W. ROLLING HILLS CIRCLE #610
City-State-Zip: DAVIE FL 33328

Title MGRM
Name CABEL, ANAMARIA I DDS
Address 3001 W. ROLLING HILLS CIRCLE #610
City-State-Zip: DAVIE FL 33328

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: CHRISTOPHER DRENNEN, DMD

MGRM

04/06/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date