

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000143067

Entity Name: BEATA CARLSON DDS, PLLC

Current Principal Place of Business:

2701 PARK DRIVE
SUITE 4
CLEARWATER, FL 33763

Current Mailing Address:

2701 PARK DRIVE
SUITE 4
CLEARWATER, FL 33763

FEI Number: 45-4102965

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARLSON, BEATA
2701 PARK DRIVE
SUITE 4
CLEARWATER, FL 33763 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 CARLSON, BEATA
Address 2701 PARK DRIVE, SUITE 4
City-State-Zip: CLEARWATER FL 33763

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: BEATA CARLSON

MGRM

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date