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: ROBERT A. DEL CASTILLO

Electronic Signature of Signing Authorized Person(s) Detail

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:	ROBERT A DE	L CASTILLO
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Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title AMBR Name DEL CASTILLO, ROBERT A Address 7735 N.W. 146TH STREET, #104 City-State-Zip: MIAMI LAKES FL 33016

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000091308

Entity Name: MIAMI LAKES PERIODONTAL AND COSMETIC CENTER, LLC

Current Principal Place of Business:

7735 N.W. 146TH STREET, #104 MIAMI LAKES. FL 33016

Current Mailing Address:

7735 N.W. 146TH STREET, #104 MIAMI LAKES. FL 33016

FEI Number: 46-0574953

Name and Address of Current Registered Agent:

DEL CASTILLO, ROBERT A 7735 N.W. 146TH STREET, #104 MIAMI LAKES, FL 33016 US

PRESIDENT/OWNER

04/11/2024

FILED Apr 11, 2024 Secretary of State 5851293910CC

Certificate of Status Desired: Yes

Date

04/11/2024

Date