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: LORI ALLISON

Electronic Signature of Signing Authorized Person(s) Detail

DIRECTOR

04/14/2021

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: SAGE DENTAL OF JENSEN BEACH, PLLC

Current Principal Place of Business:

951 BROKEN SOUND PARKWAY SUITE 250 BOCA RATON, FL 33487

DOCUMENT# L13000020730

Current Mailing Address:

951 BROKEN SOUND PARKWAY SUITE 250 BOCA RATON, FL 33487 US

FEI Number: 46-2008309

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	: LORI ALLISON		04/14/2021
	Electronic Signature of Registered Agent		Date
Authorized Person(s) Detail :			
Title	PRESIDENT	Title	OTHER
Name	ROARK, CINDY	Name	SAGE DENTAL GROUP OF FLORIDA,
Address	951 BROKEN SOUND PARKWAY	Address	PLLC 951 BROKEN SOUND PARKWAY SUITE 250
	SUITE 250 BOCA RATON FL 33487		
		City-State-Zip:	BOCA RATON FL 33487

Certificate of Status Desired: Yes

Date

FILED Apr 14, 2021 Secretary of State 9642811545CC