

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000105557

Entity Name: BRICKELL ENDODONTICS, PLLC

Current Principal Place of Business:

1800 N BAYSHORE DR #3403
MIAMI, FL 33132

Current Mailing Address:

1800 N BAYSHORE DR #3403
MIAMI, FL 33132 US

FEI Number: 46-3293554

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name GAD, MAHMOUD S
Address 1800 N BAYSHORE DR #3403
City-State-Zip: MIAMI FL 33132

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: MAHMOUD GAD

MANAGER

04/30/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date