

**2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

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:**

GAD, MAHMOUD S  
1800 N BAYSHORE DR #3403  
MIAMI, FL 33132 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:** MAHMOUD S GAD

09/30/2020

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 S GAD

MANAGER

09/30/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date