

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000116357

Entity Name: ANDEAN DENTAL SUPPLY, LLC

Current Principal Place of Business:

485 BRICKELL AVE
3601
MIAMI, FL 33131

Current Mailing Address:

485 BRICKELL AVE
3601
MIAMI, FL 33131

FEI Number: 46-4547490

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDEAN CONSULTING CORP
485 BRICKELL AVE
3601
MIAMI, FL 33131 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 ANDEAN CONSULTING CORP
Address 485 BRICKELL AVE 3601
City-State-Zip: MIAMI FL 33131

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: DAVID MCDEAVITT

MBR

01/16/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date