2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000077313

Entity Name: EAST BAY DENTAL, LLC

_____, ____, ____, ____, ____, ____, ____, ____,

Current Principal Place of Business:

1601 EAST BAY DRIVE

LARGO, FL 33771

Current Mailing Address:

2672 SPYGLASS DR CLEARWATER, FL 33761

FEI Number: 46-5644948 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOAN, AMY 2672 SPYGLASS DR CLEARWATER, FL 33761 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

FILED Apr 27, 2022

Secretary of State

3604228573CC

Authorized Person(s) Detail:

Title MGR

Name DOAN, AMY

Address 2672 SPYGLASS DR

City-State-Zip: CLEARWATER FL 33761

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.