

2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L14000184437

Entity Name: MIAMI MAXILLOFACIAL, PLLC

Current Principal Place of Business:

150 SE 2ND AVE UNIT 403
DELRAY BEACH , FL 33444

Current Mailing Address:

150 SE 2ND AVE
403
DELRAY BEACH , FL 33444 US

FEI Number: 47-2457341

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AMUNDSON , MELISSA
5575 S. SEMORAN BLVD
SUITE 36
ORLANDO, FL 32822 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: MELISSA AMUNDSON

01/30/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name AMUNDSON, MELISSA
Address 150 SE 2ND AVE
UNIT 403
City-State-Zip: DELRAY BEACH FL 33444

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: MELISSA AMUNDSON

PRESIDENT

01/30/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date