

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000092856

Entity Name: SMART HEALTH DENTAL, LLC**Current Principal Place of Business:**7154 N. UNIVERSITY DR.
STE 89
TAMARAC, FL 33321**Current Mailing Address:**1314 EAST LAS OLAS BLVD
SUITE 285
FORT LAUDERDALE, FL 33301 US**FEI Number:** 81-2643459**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GARBATI, MARIA C
1314 EAST LAS OLAS BLVD
SUITE 285
FORT LAUDERDALE, FL 33301 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:** MARIA CLARA GARBATI

02/01/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name RIVERA, RICARDO
Address 7154 N. UNIVERSITY DR.
STE 89
City-State-Zip: TAMARAC FL 33321

Title MGR
Name LUIS, RENE
Address 7154 N. UNIVERSITY DR.
STE 89
City-State-Zip: TAMARAC FL 33321

Title MGR
Name GRACIA, ELIBERTO
Address 7154 N. UNIVERSITY DR.
STE 89
City-State-Zip: TAMARAC FL 33321

Title MGR
Name GARBATI, MARIA CLARA
Address 1314 EAST LAS OLAS BLVD
SUITE 285
City-State-Zip: FORT LAUDERDALE FL 33301

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: MARIA CLARA GARBATI

MGR

02/01/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date