

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000133971

Entity Name: JOSEPH ALVAREZ, D.M.D., LLC

Current Principal Place of Business:

8951 BONITA BEACH RD. SE, STE 525
#296
BONITA SPRINGS, FL 34135

Current Mailing Address:

8951 BONITA BEACH RD. SE, STE 525
#296
BONITA SPRINGS, FL 34135 US

FEI Number: 81-3308830

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALVAREZ, JOSEPH
8951 BONITA BEACH RD. SE, STE 525
#296
BONITA SPRINGS, FL 34135 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 AMBR
Name ALVAREZ, JOSEPH
Address 8951 BONITA BEACH RD. SE, STE 525
#296
City-State-Zip: BONITA SPRINGS FL 34135

Title AUTHORIZED MEMBER
Name ALVAREZ, MITCHELLE
Address 8951 BONITA BEACH RD. SE, STE 525
#296
City-State-Zip: BONITA SPRINGS FL 34135

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: JOSEPH ALVAREZ

AMBR

04/13/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date