

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000080946

**Entity Name:** JD DENTAL LLC

**Current Principal Place of Business:**

3501 NW 84TH AVENUE  
SUNRISE, FL 33351

**Current Mailing Address:**

3501 NW 84TH AVENUE  
SUNRISE, FL 33351

**FEI Number:** 37-1860526

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ESPINO, DENISSE  
3501 NW 84TH AVENUE  
SUNRISE, FL 33351 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	Title	MGR
Name	GARCIA, JENNIFER	Name	ESPINO, DENISSE
Address	3501 NW 84TH AVENUE	Address	3501 NW 84TH AVENUE
City-State-Zip:	SUNRISE FL 33351	City-State-Zip:	SUNRISE FL 33351

*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:** DENISSE ESPINO

**AGENT**

**03/05/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date