

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000110123

Entity Name: SMILE AESTHETICS LLC

Current Principal Place of Business:

22020 SW 100TH PL
CUTLER BAY, FL 33190

Current Mailing Address:

22020 SW 100TH PL
CUTLER BAY, FL 33190 US

FEI Number: 82-1601028

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PORTIELES, WILLIAM
22020 SW 100TH PL
CUTLER BAY, FL 33190 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 PORTIELES, WILLIAM
Address 22020 SW 100TH PL
City-State-Zip: CUTLER BAY FL 33190

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: WILLIAM PORTIELES

AMBR

04/16/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date