

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000172747

Entity Name: DENTALPERIOCARE LLC

Current Principal Place of Business:

12712 NW 17TH STREET
CORAL SPRINGS, FL 33071

Current Mailing Address:

12712 NW 17TH STREET
CORAL SPRINGS, FL 33071 US

FEI Number: 82-2476412

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARLADE, JAIME
5975 SUNSET DRIVE
SUITE 802
SOUTH MIAMI, FL 33143 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: JAIME PARLADE

01/16/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name PORRAS, JOSE RAFAEL SR.
Address 3400 DAVIE ROAD
City-State-Zip: DAVIE FL 33314

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: JOSE RAFAEL PORRAS SR.

MGR

01/16/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date