

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000243341

Entity Name: BRANDON LARKIN DDS, PLLC

Current Principal Place of Business:

16688 N DALE MABRY HWY
TAMPA, FL 33618

Current Mailing Address:

16688 N DALE MABRY HWY
TAMPA, FL 33618 US

FEI Number: 82-3623989

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LARKIN, BRANDON R
16688 N. DALE MABRY HWY
TAMPA, FL 33618 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 AP
Name LARKIN, BRANDON
Address 16688 N DALE MABRY HWY
City-State-Zip: TAMPA FL 33618

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: BRANDON R LARKIN

02/14/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date