2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 10, 2025
Secretary of State
7541122608CC

DOCUMENT# L18000058657

Entity Name: BEACHES SMILES, LLC

Current Principal Place of Business:

150 PROFESSIONAL DR #100
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

150 PROFESSIONAL DR #100
PONTE VEDRA BEACH, FL 32082 US

FEI Number: 45-2794615

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOLAN, JAMES A ESQ
50 N LAURA ST #1100
JACKSONVILLE, FL 32202 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
Name	PATEL, SHREENA
Address	150 PROFESSIONAL DR #100
City-State-Zip:	PONTE VEDRA BEACH FL 32082

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: SHREENA PATEL OWNER/ORTHODONTIST 02/10/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date