

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000056487

Entity Name: SMILE EXPERIENCE, PLLC

Current Principal Place of Business:

1433 COURT STREET
CLEARWATER, FL 33756

Current Mailing Address:

1433 COURT STREET
CLEARWATER, FL 33756 US

FEI Number: 83-3852073

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CHESTNUT BUSINESS SERVICES, LLC
911 CHESTNUT STREET
CLEARWATER, FL 33756 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 MCDOWELL, ERNEST H D.D.S.
Address 1433 COURT STREET
City-State-Zip: CLEARWATER FL 33756

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: ERNEST H. MCDOWELL

MANAGER

04/07/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date