

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000276086

Entity Name: CONSCIOUS CARE DENTAL, LLC

Current Principal Place of Business:

2926 JOG RD
GREENACRES, FL 33463

Current Mailing Address:

9790 PALMA VISTA WAY
BOCA RATON, FL 33428 PB

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEVEN CRANE DMD, PA
9790 PALMA VISTA WAY
BOCA RATON, FL 33428 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 CRANE, STEVEN DR
Address 9790 PALMA VISTA WAY
City-State-Zip: BOCA RATON FL 33428

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: STEVEN CRANE

OWNER

03/19/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date