

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000288003

**Entity Name:** STAR DENTAL STAFFING, LLC

**Current Principal Place of Business:**

777 SOUTH FEDERAL HWY  
UNIT N-204  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

777 SOUTH FEDERAL HWY  
UNIT N-204  
POMPANO BEACH, FL 33062 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PASSARINI, ANDREA  
777 SOUTH FEDERAL HWY  
UNIT N-204  
POMPANO BEACH, FL 33062 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	Title	MGR
Name	PASSARINI, RACHEL	Name	PASSARINI, TIAGO
Address	15177 E. NASSAU AVE	Address	15177 E. NASSAU AVE
City-State-Zip:	AURORA CO 80014	City-State-Zip:	AURORA CO 80014

*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:** RACHEL PASSARINI

**MANAGER**

**03/09/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date