

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000371164

Entity Name: PURFECT PUPPY DENTAL, LLC

Current Principal Place of Business:

355 EMORY DR
DAYTONA BEACH, FL 32118

Current Mailing Address:

PO BOX 1993
ORMOND BEACH, FL 32175 US

FEI Number: 85-4214465

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAMAAN, CONSTANTINA
355 EMORY DR
DAYTONA BEACH, FL 32118 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 SAMAAN, CONSTANTINA
Address 355 EMORY DR
City-State-Zip: DAYTONA BEACH FL 32118

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: CONSTANTINA SAMAAN

MGR

02/21/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date