

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000215299

Entity Name: ADAM M. MILLER, DDS, LLC

Current Principal Place of Business:

6232 PASADENA POINT BLVD, SOUTH
GULFPORT, FL 33707

Current Mailing Address:

5347 MAIN ST
SUITE 303
NEW PORT RICHEY, FL 34652 US

FEI Number: 86-3741784

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLER, ADAM M
6232 PASADENA POINT BLVD., SOUTH
GULFPORT, FL 33707 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 MILLER, ADAM M
Address 6232 PASADENA POINT BLVD, SOUTH
City-State-Zip: GULFPORT FL 33707

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: ADAM M MILLER

MANAGER

02/21/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date