#### 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000335106

Entity Name: DENTAL IMPLANT LECTURE SERVICES, LLC

# **Current Principal Place of Business:**

2460 N. ESSEX AVENUE HERNANDO, FL 34442

# **Current Mailing Address:**

2460 N. ESSEX AVENUE HERNANDO. FL 34442

FEI Number: 87-2867099 Certificate of Status Desired: No

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

LASORSA, MATTHEW J 2460 N. ESSEX AVENUE HERNANDO, FL 34442 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

**FILED** Feb 14, 2022

**Secretary of State** 

2828928423CC

# Authorized Person(s) Detail:

Title

Name LASORSA, MATTHEW J Address 2460 N. ESSEX AVENUE City-State-Zip: HERNANDO FL 34442

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: MATTHEW LASORSA

**OWNER** 

02/14/2022