

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000144071

Entity Name: ALAFAYA FAMILY DENTISTRY, PLLC

Current Principal Place of Business:

3221 CONWAY RD
STE D
ORLANDO, FL 32812

Current Mailing Address:

3221 CONWAY RD
STE D
ORLANDO, FL 32812 US

FEI Number: 88-1366724

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBINSON, MATTHEW
3221 CONWAY RD
STE D
ORLANDO, FL 32812 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 KELLY, PETER
Address 3221 CONWAY RD STE D
City-State-Zip: ORLANDO FL 32812

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: PETER KELLY

MGR

02/06/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date