## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000125614

Entity Name: SAGE DENTAL OF ALAFAYA, PLLC

**Current Principal Place of Business:** 

6600 CONGRESS AVE., STE 150 BOCA RATON, FL 33487

**Current Mailing Address:** 

6600 CONGRESS AVE., STE 150 BOCA RATON. FL 33487 US

FEI Number: 92-2996475 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 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:

Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title **PRESIDENT** Name

SAGE DENTAL GROUP OF FLORIDA, Name ROARK, CINDY **PLLC** 

6600 CONGRESS AVE., STE 150 Address Address 6600 CONGRESS AVE., STE 150

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

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: LORI ALLISON

DIRECTOR OF **PURCHASING &** SUPPORT SERVICES 02/11/2025

**FILED** Feb 11, 2025

**Secretary of State** 

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