

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000001094

Entity Name: FORT LAUDERDALE CLEARCHOICE DENTAL, LLC**Current Principal Place of Business:**8350 E CRESCENT PKWY
SUITE 300
GREENWOOD VILLAGE, CO 80111**Current Mailing Address:**8350 E CRESCENT PKWY
SUITE 300
GREENWOOD VILLAGE, CO 80111 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title	MANAGER
Name	DEYOUNG, ROBERT
Address	8350 E CRESCENT PKWY SUITE 300
City-State-Zip:	GREENWOOD VILLAGE CO 80111
Title	MANAGER
Name	MOSHER, KEVIN
Address	8350 E CRESCENT PKWY SUITE 300
City-State-Zip:	GREENWOOD VILLAGE CO 80111

Title	MANAGER
Name	SMYTHE, DENNIS
Address	8350 E CRESCENT PKWY SUITE 300
City-State-Zip:	GREENWOOD VILLAGE CO 80111

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: KEVIN MOSHER

MANAGER

03/30/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date