

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000007654

Entity Name: HENRY SCHEIN ONE, LLC

Current Principal Place of Business:

1220 SOUTH 630 EAST
AMERICAN FORK, UT 84003

Current Mailing Address:

135 DURYEYEA ROAD
MELVILLE, NY 11747 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 CHIEF FINANCIAL OFFICER
Name HEIM, CHRIS
Address 135 DURYEYEA ROAD
City-State-Zip: MELVILLE NY 11747

Title SECRETARY
Name FERRERO, JENNIFER
Address 135 DURYEYEA ROAD
City-State-Zip: MELVILLE NY 11747

Title ASSISTANT SECRETARY
Name WICH SUGDEN, KATHERINE
Address 909 N. PACIFIC COAST HWY, 11TH FLOOR
City-State-Zip: EL SEGUNDO CA 90245

Title CHIEF COMMERCIAL OFFICER OF DENTAL PLANS
Name STOLL, JENNIFER
Address 8100 SW 10TH STREET, SUITE 2000
City-State-Zip: PLANTATION FL 33324

Title MANAGER
Name SARNOFF, RICHARD
Address 1220 SOUTH 630 EAST
City-State-Zip: AMERICAN FORK UT 84003

Title MANAGER
Name FRIEDMAN, SCOTT
Address 1220 SOUTH 630 EAST
City-State-Zip: AMERICAN FORK UT 84003

Title MANAGER
Name BRISCO, ROBERT
Address 1220 SOUTH 630 EAST
City-State-Zip: AMERICAN FORK UT 84003

Title MANAGER
Name MLOTEK, MARK E.
Address 4300 STINE ROAD SUITE 209
City-State-Zip: BAKERSFIELD CA 93313

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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: B. LYNN WALSH

MANAGER

04/27/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MANAGER
Name BRESLAWSKI, JAMES P.
Address 135 DURYEА ROAD
City-State-Zip: MELVILLE NY 11747

Title MANAGER
Name BERGMAN, STANLEY M.
Address 135 DURYEА ROAD
City-State-Zip: MELVILLE NY 11747

Title MANAGER
Name WALSH, B. LYNN
Address 1220 SOUTH 630 EAST
City-State-Zip: AMERICAN FORK UT 84003

Title MANAGER
Name KING, CHRISTINE
Address 1220 SOUTH 630 EAST
City-State-Zip: AMERICAN FORK UT 84003

Title MANAGER
Name PALADINO, STEVEN
Address C/O HENRY SCHEIN, INC
 135 DURYEА ROAD E-365
City-State-Zip: MELVILLE NY 11747