

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000119567

FILED
Feb 02, 2012
Secretary of State

Entity Name: LITTLE SMILES DENTAL OFFICE #3, LLC

Current Principal Place of Business:

3469 W. BOYNTON BEACH BLVD
SUITE 20
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

3469 W. BOYNTON BEACH BLVD
SUITE 20
BOYNTON BEACH, FL 33436

New Mailing Address:

FEI Number: 27-1497936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORTES, BAYARDO
12420 SW 22 TERRACE
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: CORTES, BAYARDO
Address: 12420 SW 22 TERRACE
City-St-Zip: MIAMI, FL 33175

Title: MGR
Name: CORTES, GONZALO
Address: 350 S. MIAMI AVE, APT. 1202
City-St-Zip: MIAMI, FL 33130

Title: MGR
Name: SPENCER, CRAIG
Address: 625 SE 2ND AVENUE
City-St-Zip: BOYNTON BEACH, FL 33435

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: CRAIG SPENCER

MGR

02/02/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date