

2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L13000056568

FILED
Oct 09, 2014
Secretary of State

Entity Name: SEACREST DENTAL II LLC

Current Principal Place of Business:

66 N HOLIDAY RD
MIRAMAR BEACH, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

5399 E COUNTY HWY 30A
SUITE 1
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: 46-2496447 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RUDER, FRED E
5399 E COUNTY HWY 30A
SUITE 1
SANTA ROSA BEACH, FL 32459 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: FRED E RUDER

Electronic Signature of Registered Agent

Date

AUTHORIZED PERSONS:

Title: MGRM
Name: RUDER, MELANIE R
Address: 5399 E COUNTY HWY 30A, SUITE 1
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: AMBR
Name: RUDER, FRED
Address: 5399 E COUNTRY HWY 30A SUITE 1
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: AMBR
Name: RUDER, REESE
Address: 5399 E COUNTRY HWY 30A SUITE 1
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: AMBR
Name: RUDER, ROSS
Address: 5399 E COUNTRY HWY 30A SUITE 1
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: FRED E RUDER

MGR

10/09/2014

Electronic Signature of Authorized Person

Date