### 2016 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N13000000617

Entity Name: MIAMI-DADE COUNTY DENTAL SOCIETY, INC.

FILED
Oct 25, 2016
Secretary of State
CR9471170624

## **Current Principal Place of Business:**

8878 NW 7TH AVE. MIAMI. FL 33150

# **Current Mailing Address:**

8878 NW 7TH AVE. MIAMI, FL 33150

FEI Number: 46-1925645 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

TOWNSEND, LINWOOD T 8878 NW 7TH AVE. MIAMI, FL 33150 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: LINWOOD TOWNSEND 10/25/2016

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title VP Title I

 Name
 CAMPBELL, BETH-ANN
 Name
 NELSON, JOHN

 Address
 8878 NW 7TH AVE
 Address
 8878 NW 7TH AVE.

 City-State-Zip:
 MIAMI FL 33150
 City-State-Zip:
 MIAMI FL 33150

Title T

Name TOWNSEND, LINWOOD
Address 8878 NW 7TH AVE.

City-State-Zip: MIAMI FL 33150

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**PRESIDENT** 

SIGNATURE: JOHN A. NELSON

Electronic Signature of Signing Officer/Director Detail

10/25/2016

Date