	490 HWY 85 N SUITE #C NICEVILLE, FL 32578		
	Current Mailing Address:		
	4479 GIANNA WAY NICEVILLE, FL 32578 US		
	FEI Number: 26-2560854	Certificate of Status Desired:	
Name and Address of Current Registered Agent:			
	MARCANTONIO, MICHAEL H 4479 GIANNA WAY NICEVILLE, FL 32578 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.		

ibmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	MICHAEL H MARCANTONIO		02/06/2019	
	Electronic Signature of Registered Agent		Date	
Officer/Director Detail :				
Title	PTD	Title	VSD	
Name	MARCANTONIO, MICHAEL HDMD	Name	MARCANTONIO, CATHERINE VDMD	
Address	4479 GIANNA WAY	Address	4479 GIANNA WAY	
City-State-Zip:	NICEVILLE FL 32578	City-State-Zip:	NICEVILLE FL 32578	

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL H MARCANTONIO

OWNER/DENTIST

02/06/2019 Date

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P08000042435

Entity Name: MICHAEL H. MARCANTONIO, D.M.D., AND CATHERINE V. MARCANTONIO, D.M.D., P.A.

Current Principal Place of Business:

FILED Feb 06, 2019 **Secretary of State** 3921270229CC

No