

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000120434

Entity Name: DDS CONCEPTS, LLC

Current Principal Place of Business:

5440 BEAUMONT CENTER BOULEVARD
SUITE 400
TAMPA, FL 33634

Current Mailing Address:

5440 BEAUMONT CENTER BOULEVARD
SUITE 400
TAMPA, FL 33634 US

FEI Number: 57-1220617

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: LORI WILLIAMS

03/31/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MANAGER	Title	CONTROLLER
Name	DDS LAB, LLC	Name	MILLER, AMANDA
Address	5440 BEAUMONT CENTER BOULEVARD SUITE 400	Address	5440 BEAUMONT CENTER BOULEVARD SUITE 400
City-State-Zip:	TAMPA FL 33634	City-State-Zip:	TAMPA FL 33634

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: AMANDA MILLER

CONTROLLER

03/31/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date