2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2015
Secretary of State
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Entity Name: DORAL ENDODONTICS, LLC

Current Principal Place of Business:

3650 NW 82 AVENUE
303
DORAL, FL 33166

Current Mailing Address:

3650 NW 82 AVENUE
303
DORAL, FL 33166

FEI Number: 20-4753220

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LLANO, JUAN G
3650 NW 82 AVENUE
303
DORAL, FL 33166 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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	MGRM
Name	JUAN G. LLANO DMD, PA	Name	GIL, EVELYN ASECRETA
Address	3650 NW 82 AVENUE-SUITE 303	Address	3650 NW 82 AVENUE-SUITE 303
City-State-Zip:	DORAL FL 33166	City-State-Zip:	DORAL FL 33166

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: JUAN G. LLANO MGR 04/21/2015

Electronic Signature of Signing Authorized Person(s) Detail — Date