## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000019603

Entity Name: SOUTH BEACH DENTAL, L.L.C.

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

1840 N.E. 153RD STREET NORTH MIAMI BEACH, FL 33162

## **Current Mailing Address:**

1840 N.E. 153RD STREET NORTH MIAMI BEACH, FL 33162

## FEI Number: 20-5373313

# Name and Address of Current Registered Agent:

LEE, HEATHER 6633 ROXBURY LANE MIAMI BEACH, FL 33141 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

#### Authorized Person(s) Detail :

TitleMGRMNameGARG, ARUN KAddress1840 N.E. 153RD STREETCity-State-Zip:NORTH MIAMI BEACH FL 33162

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: ARUN GARG	MGRM	02/26/2015

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 26, 2015 Secretary of State CC5520835358

Certificate of Status Desired: No

Date

Date