## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000061378

Entity Name: SAGE DENTAL OF EAST BOYNTON BEACH, PLLC

**FILED** Apr 14, 2021 **Secretary of State** 1028313221CC

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

951 BROKEN SOUND PARKWAY SUITE 250 BOCA RATON, FL 33487

## **Current Mailing Address:**

951 BROKEN SOUND PARKWAY SUITE 250 BOCA RATON, FL 33487 US

FEI Number: 27-2808652 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 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 ALLISON 04/14/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Address

**PRESIDENT** Title Title OTHER

ROARK, CINDY Name Name SAGE DENTAL GROUP OF FLORIDA,

> **PLLC** 951 BROKEN SOUND PARKWAY

951 BROKEN SOUND PARKWAY Address SUITE 250

SUITE 250 BOCA RATON FL 33487

City-State-Zip: City-State-Zip: BOCA RATON FL 33487

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.

04/14/2021 DIRECTOR SIGNATURE: LORI ALLISON