## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000091557

Entity Name: DENTISTRY BY DESIGN, LLC

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

3889 MILITARY TRAIL SUITE 102

JUPITER, FL 33458

**Current Mailing Address:** 

PO BOX 69

JUPITER, FL 33468-0069 US

FEI Number: 45-2989961 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MEDICAL CONSULTANTS OF FLORIDA, LLC 3889 MILITARY TRAIL SUITE 104 JUPITER, FL 33458 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: MAZIN SHIKARA, MD 06/22/2020

Electronic Signature of Registered Agent

Date

**FILED** Jun 22, 2020

**Secretary of State** 

4142115968CC

Authorized Person(s) Detail:

Title MGR

MEDICAL CONSULTANTS FLORIDA, Name

Address 3889 MILITARY TRAIL

SUITE 104

City-State-Zip: JUPITER FL 33458

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: MEDICAL CONSULTANTS OF FLORIDA, LLC

Electronic Signature of Signing Authorized Person(s) Detail

Ρ

06/22/2020

Date