

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000119490

Entity Name: ALAN D. SHOOPAK, D.M.D. ORTHODONTIC GROUP I, LLC

Current Principal Place of Business:

6311 4TH STREET NORTH
ST PETERSBURG, FL 33702

Current Mailing Address:

6311 4TH STREET NORTH
ST PETERSBURG, FL 33702 US

FEI Number: 45-3735299

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHOOPAK, ALAN D
6311 4TH STREET NORTH
ST. PETERSBURG, FL 33702 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	MGR
Name	SHOOPAK, ALAN D	Name	BUCHMAN, DENNIS J.
Address	6311 4TH STREET NORTH	Address	6311 4TH STREET NORTH
City-State-Zip:	ST. PETERSBURG FL 33702	City-State-Zip:	ST.PETERSBURG FL 33702

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: ALAN SHOOPAK

MGR

01/23/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date