

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000056159

Entity Name: SENIOR DENTAL CARE OF SOUTH CAROLINA, LLC

Current Principal Place of Business:

16119 STATE ROAD 71 SOUTH
BLOUNTSTOWN, FL 32424

Current Mailing Address:

PO BOX 367
BLOUNTSTOWN, FL 32424 US

FEI Number: 46-2282633

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL REGISTERED AGENTS, INC.
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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGRM
Name LAYNE DENTAL HOLDINGS, LLC
Address 19606 STATE ROAD 20 WEST
City-State-Zip: BLOUNTSTOWN FL 32424

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: TONY LAYNE

MGR

02/21/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date