2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2014
Secretary of State
CC2041865550

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Entity Name: DENTS PLUS LLC

Current Principal Place of Business:

203 N 5TH STREET
ORLANDO, FL 32833

Current Mailing Address:

203 N 5TH STREET
ORLANDO, FL 32833

FEI Number: 46-1181871

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KNORR, BILLY
203 N 5TH STREET
ORLANDO, FL 32833 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	KNORR, BILLY
Address	203 N 5TH STREET
City-State-Zip:	ORLANDO FL 32833

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: BILLY KNORR DENTS PLUS LLC 04/18/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date