

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000005462

Entity Name: ENDODONTIC SPECIALTY GROUP, LLC

Current Principal Place of Business:

3 SW 129 AVE
STE 205
PEMBROKE PINES, FL 33027

Current Mailing Address:

3 SW 129 AVE
STE 205
PEMBROKE PINES, FL 33027 US

FEI Number: 01-0576412

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EDWARD, KIRSH DR.
3 SW 129TH AVE
STE 205
PEMBROKE PINES, FL 33027 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: EDWARD KIRSH

02/13/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name KIRSH, EDWARD R DR.
Address 3 SW 129TH AVE, SUITE 205
City-State-Zip: PEMBROKE PINES FL 33027

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: EDWARD KIRSH

PRINCIPAL

02/13/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date