## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000090374

Entity Name: PIRKLE DENTAL, LLC

**Current Principal Place of Business:** 

230 NW 76TH ST

#B GAINESVILLE, FL 32607

**Current Mailing Address:** 

621 SEBASTIAN BLVD SUITE A

SEBASTIAN, FL 32958 US

FEI Number: 46-3181612 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PIRKLE, PATRICK W 230 NW 76TH ST # R

#B GAINESVILLE, FL 32607 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: PATRICK W. PIRKLE 04/10/2017

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR Title MANAGER

NamePIRKLE, PATRICK WNamePIRKLE, PATRICK W DR.Address230 NW 76TH ST - # BAddress621 SEBASTIAN BLVD

SUITE A

City-State-Zip: GAINESVILLE FL 32607 City-State-Zip: SEBASTIAN FL 32958

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: PATRICK PIRKLE MANAGER

04/10/2017 Date

FILED Apr 10, 2017

**Secretary of State** 

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