

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000111123

Entity Name: TEAM SOLUTIONS DENTAL LLC

Current Principal Place of Business:

2675 SOUTH DESIGN CT
SANFORD, FL 32773

Current Mailing Address:

2675 SOUTH DESIGN CT
SANFORD, FL 32773 US

FEI Number: 46-3352759

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEFRANCO, JASON OWNER
2675 SOUTH DESIGN CT
SANFORD, FL 32773 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: JASON DEFRANCO

04/05/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MANAGER
Name	DEFRANCO, JASON M	Name	HOLMAN, CHAD
Address	2675 SOUTH DESIGN CT	Address	2675 SOUTH DESIGN COURT
City-State-Zip:	SANFORD FL 32773	City-State-Zip:	SANFORD FL 32773

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: JASON DEFRANCO

OWNER

04/05/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date