

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000159914

**Entity Name:** FELICITA MARQUEZ IGLESIAS, DDS PLLC

**Current Principal Place of Business:**

4890 W 3RD AVE  
HIALEAH, FL 33012

**Current Mailing Address:**

4890 W 3RD AVE  
MIAMI, FL 33012 US

**FEI Number:** 46-4110142

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MARQUEZ IGLESIAS, FELICITA  
4890 W 3RD AVE  
HIALEAH, FL 33012 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:** FELICITA MARQUEZ IGLESIAS

03/01/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MARQUEZ IGLESIAS, FELICITA  
Address 4890 W 3RD AVE  
City-State-Zip: MIAMI FL 33012

*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:** FELICITA MARQUEZ IGLESIAS

MANAGER

03/01/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date