

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000000113

Entity Name: SPECIALTY DENTAL STUDIO LLC

Current Principal Place of Business:

4675 ELEVATION WAY
STE 100
FORT MYERS, FL 33905

Current Mailing Address:

4675 ELEVATION WAY
STE 100
FORT MYERS, FL 33905 US

FEI Number: 46-4472085

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TAX & FINANCIAL STRATEGISTS, LLC
28089 VANDERBILT DRIVE
SUITE 201
BONITA SPRINGS, FL 34134 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: LISA ZAHORIAN

03/28/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title OM
Name VUJAKLIJA, IGOR
Address 1506 WHISKEY CREEK DR.
City-State-Zip: FORT MYERS FL 33919

Title S
Name VUJAKLIJA, IGOR
Address 1506 WHISKEY CREEK DR.
City-State-Zip: FORT MYERS FL 33919

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: IGOR VUJAKLIJA

PRESIDENT

03/28/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date