

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000075504

Entity Name: SOUTH FLORIDA DENTAL CONSULTANTS, LLC

Current Principal Place of Business:

120 SUNESTA COVE DR
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

120 SUNESTA COVE DR
PALM BEACH GARDENS, FL 33418 US

FEI Number: 16-7322097

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLEWANS, SAMUEL N
120 SUNESTA COVE DR
PALM BEACH GARDENS, FL 33418 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name KLEWANS, SAMUEL N
Address 120 SUNESTA COVE DR
City-State-Zip: PALM BEACH GARDENS FL 33418

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: SAMUEL N KLEWANS

MANAGER

03/04/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date