

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000079102

**Entity Name:** SENTINEL MOUTHGUARDS, LLC

**Current Principal Place of Business:**

1146 39TH AVE NE  
ST PETERSBURG, FL 33703

**Current Mailing Address:**

1146 39TH AVE NE  
ST PETERSBURG, FL 33703 US

**FEI Number:** 46-5665996

**Certificate of Status Desired:** No

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

BASS & SANDFORT ACCOUNTANTS, PA  
1301 W GARDEN ST  
PENSACOLA, FL 32502 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 NOTARMASO, ASHELY L  
Address 1149 39TH AVE NE  
City-State-Zip: ST PETERSBURG FL 33703

*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:** ASHELY L. NOTARMASO

**OWNER**

**03/18/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date