

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000123743

Entity Name: LUCIANA MOLINARI DDS, PLLC

Current Principal Place of Business:

604 CRANDON BLVD
SUITE 205
KEY BISCAYNE, FL 33149

Current Mailing Address:

604 CRANDON BLVD
SUITE 205
KEY BISCAYNE, FL 33149 US

FEI Number: 47-1559201

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOLINARI, LUCIANA
604 CRANDON BLVD
SUITE 205
KEY BISCAYNE, FL 33149 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 MOLINARI, LUCIANA
Address 604 CRANDON BLVD
SUITE 205
City-State-Zip: KEY BISCAYNE FL 33149

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: LUCIANA MOLINARI

MANAGER

04/26/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date