

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000095361

Entity Name: FLORIDA QUALITY DENTAL REPAIR, LLC

Current Principal Place of Business:

3540 BLUEBERRY DRIVE
LAKELAND, FL 33811

Current Mailing Address:

3540 BLUEBERRY DRIVE
LAKELAND, FL 33811

FEI Number: 26-3218748

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HERMAN, ANDREW
3540 BLUEBERRY DRIVE
LAKELAND, FL 33811 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 HERMAN, ANDREW
Address 3540 BLUEBERRY DRIVE
City-State-Zip: LAKELAND FL 33811

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: ANDREW HERMAN

OWNER

08/27/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date