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. 04/12/2023

SIGNATURE: DONALD GALLO

Electronic Signature of Signing Authorized Person(s) Detail

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000082166

Entity Name: CUTLER BAY DENTAL SPECIALTY, PLLC

Current Principal Place of Business:

20529 OLD CUTLER ROAD CUTLER BAY, FL 33189

Current Mailing Address:

6240 LAKE OSPREY DRIVE SARASOTA, FL 34240 UN

FEI Number: 81-2396703

Name and Address of Current Registered Agent:

ALLEN, RUSSELL 6240 LAKE OSPREY DRIVE SARASOTA, FL 34240 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:	: RUSSELL ALLEN			04/12/2023
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	DIRECTOR	Title	MANAGER	
Name	GALLO, DONALD	Name	RIBEIRO, ALEXANDRE	
Address	6240 LAKE OSPREY DRIVE	Address	6240 LAKE OSPREY DRIVE	
City-State-Zip:	SARASOTA 34240	City-State-Zip:	SARASOTA 34240	

MANAGER

Secretary of State 0879464718CC

FILED Apr 12, 2023

Certificate of Status Desired: No

Date