

2024 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

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DIRECTOR
Name GALLO, DONALD
Address 6240 LAKE OSPREY DRIVE
City-State-Zip: SARASOTA 34240

Title MANAGER
Name RIBEIRO, ALEXANDRE
Address 6240 LAKE OSPREY DRIVE
City-State-Zip: SARASOTA 34240

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: DONALD GALLO

MANAGER

07/24/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date