## 2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L16000089676

Entity Name: SMILE DESIGN DENTAL LABORATORY LLC

FILED
Oct 11, 2019
Secretary of State
4838537724CR

## **Current Principal Place of Business:**

9237 SW 227 ST UNIT #5

CUTLER BAY, FL 33190

## **Current Mailing Address:**

9237 SW 227 ST UNIT #5

CUTLER BAY, FL 33190 US

FEI Number: 81-2626601 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DENTAL LABORATORY 9237 SW 227 ST UNIT #5 CUTLER BAY, FL 33190 US

Name

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: YENNI BRANCO 10/11/2019

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title SMILE DESIGN DENTAL Title P

 LABORATORY
 Name
 BRANCO, YENNI

 YENNI BRANCO
 Address
 9237 SW 227 ST

Address 9237 SW 227 ST UNIT 5

UNIT #5

City-State-Zip: CUTLER BAY FL 33190

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.