

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000122079

Entity Name: CW ENDODONTICS, LLC

Current Principal Place of Business:

625 EICHENFELD DR
BRANDON, FL 33511

Current Mailing Address:

3690 W GANDY BLVD., #437
TAMPA, FL 36611-3300 US

FEI Number: 81-3454404

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALTZ, CHAD M
3690 W GANDY BLVD., #437
TAMPA, FL 36611-3300 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 AMBR
Name WALTZ, CHAD M
Address 4702 W PAUL AVE
City-State-Zip: TAMPA FL 33611

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: CHAD WALTZ

AMBR

02/11/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date