

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000128306

Entity Name: ROGELIO GARROTE, DMD, P.L.L.C.

Current Principal Place of Business:

4530 S.W. 89TH AVENUE
MIAMI, FL 33165

Current Mailing Address:

4530 S.W. 89TH AVENUE
MIAMI, FL 33165

FEI Number: 81-3236369

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARROTE, ROGELIO
4530 S.W. 89TH AVENUE
MIAMI, FL 33165 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 MANAGER
Name GARROTE, ROGELIO DR.
Address 4530 S.W. 89TH AVENUE
City-State-Zip: MIAMI FL 33165

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: ROGELIO GARROTE

DR.

04/01/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date