

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000230684

Entity Name: SHAUN L. SMITH, D.D.S., PLLC

Current Principal Place of Business:

8223 W ATLANTIC BOULEVARD
CORAL SPRINGS, FL 33071

Current Mailing Address:

8223 W ATLANTIC BOULEVARD
CORAL SPRINGS, FL 33071 US

FEI Number: 81-4760671

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, SHAUN L DDS
8223 W ATLANTIC BOULEVARD
CORAL SPRINGS, FL 33071 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 CEO
Name SMITH, SHAUN L DDS
Address 8223 W ATLANTIC BOULEVARD
City-State-Zip: CORAL SPRINGS FL 33071

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: SHAUN L SMITH DDS

OWNER

02/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date