

2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L17000072850

Entity Name: TROPICAL DENTAL LLC

Current Principal Place of Business:

6425 NASSAU AVE
ORLANDO, FL 32822

Current Mailing Address:

6425 NASSAU AVE
ORLANDO, FL 32822 UN

FEI Number: 82-1065600

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, MARITZA
6425 NASSAU AVE
ORLANDO, FL 32822 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: MARITZA GARCIA

11/11/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name GARCIA, MARITZA
Address 6425 NASSAU AVE
City-State-Zip: ORLANDO FL 32822

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: MARITZA GARCIA

P/D

11/11/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date