

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000081564

**Entity Name:** BRICKELL INVISALIGN CENTRE LLC

**Current Principal Place of Business:**

1250 SOUTH MIAMI AVENUE  
SUITE #100  
MIAMI, FL 33130

**Current Mailing Address:**

1250 SOUTH MIAMI AVENUE  
SUITE #100  
MIAMI, FL 33130 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

GRUSSMARK, STEPHEN M  
4425 PONCE DE LEON BLVD.  
SUITE #100  
CORAL GABLES, FL 33146 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            GRUSSMARK, STEPHEN M  
Address        8950 SW 74TH COURT  
                  SUITE #1214  
City-State-Zip: MIAMI FL 33156

*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:** STEPHEN M. GRUSSMARK

**MEMBER**

**04/30/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date