

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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**FILED
Apr 16, 2019
Secretary of State
3689638278CC**

Entity Name: USA DENTAL INSTITUTE, LLC

Current Principal Place of Business:

225 N.E. MIZNER BOULEVARD, SUITE 510
BOCA RATON, FL 33432

Current Mailing Address:

225 N.E. MIZNER BOULEVARD, SUITE 510
BOCA RATON, FL 33432 US

FEI Number: 82-2063966

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOBIN & REYES, P.A.
225 N.E. MIZNER BOULEVARD, SUITE 510
BOCA RATON, FL 33432 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 SMITH, M. BROOKS
Address 225 N.E. MIZNER BOULEVARD, SUITE
 510
City-State-Zip: BOCA RATON FL 33432

Title MANAGER
Name TOBIN, DAVID S.
Address 225 N.E. MIZNER BOULEVARD, SUITE
 510
City-State-Zip: BOCA RATON FL 33432

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: DAVID S. TOBIN

MANAGER

04/16/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date