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: DONALD GALLO MGR 04/19/2019

Electronic Signature of Signing Authorized Person(s) Detail

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000147649

Entity Name: TOWNCARE DENTAL OF LONDON SQUARE, PLLC

Current Principal Place of Business:

13400 SW 120TH STREET SUITE 302 MIAMI, FL 33186

Current Mailing Address:

6240 LAKE OSPREY DRIVE SARASOTA, FL 34240 US

FEI Number: 82-2117282

Name and Address of Current Registered Agent:

ALLEN, RUSSELL 6240 LAKE OSPREY DRIVE SARASOTA, FL 34240 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

Authorized Person(s) Detail :

Title	MGR
Name	GALLO, DONALD A D.M.D.
Address	6240 LAKE OSPREY DRIVE
City-State-Zip:	SARASOTA FL 34240

Certificate of Status Desired: No

Date

Date

FILED Apr 19, 2019 Secretary of State 8864941195CC