## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000110149

**Entity Name: OPERATION DENTAL LLC** 

**Current Principal Place of Business:** 

865 BALCH AVENUE WINTER PARK, FL 32789

**Current Mailing Address:** 

865 BALCH AVENUE

WINTER PARK, FL 32789 US

FEI Number: 83-0968608 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLY, PETER 865 BALCH AVENUE WINTER PARK, FL 32789 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

03/15/2024

Date

FILED Mar 15, 2024

**Secretary of State** 

4951054505CC

Authorized Person(s) Detail:

Title MGR Title MGR

NameKELLY, PETERNameROBINSON, MATTAddress865 BALCH AVENUEAddress865 BALCH AVENUECity-State-Zip:WINTER PARK FL 32789City-State-Zip: WINTER PARK FL 32789

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: PETER KELLY MGR

Electronic Signature of Signing Authorized Person(s) Detail