

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000173656

Entity Name: DESIGN DENTAL STUDIOS, LLC

Current Principal Place of Business:

2151 5TH AVE N
SAINT PETERSBURG, FL 33713

Current Mailing Address:

2151 5TH AVE N
SAINT PETERSBURG, FL 33713 US

FEI Number: 84-2510440

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMSON, AMBER I
501 26 AVENUE SOUTH
ST. PETERSBURG, FL 33705 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 WILLIAMSON, AMBER IONE
Address 501 26TH AVENUE SOUTH
City-State-Zip: ST. PETERSBURG FL 33705

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: AMBER WILLIAMSON

OWNER

02/05/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date