

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000242981

Entity Name: SMILE INSTITUTE FOR HOLISTIC AND MODERN DENTISTRY
PLLC

FILED
Apr 25, 2025
Secretary of State
1042322356CC

Current Principal Place of Business:

9882 GLADES RD
SUITE E-6
BOCA RATON, FL 33434

Current Mailing Address:

9882 GLADES RD
SUITE E-6
BOCA RATON, FL 33434

FEI Number: 84-3333237

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KARLA, SOTO J
9882 GLADES RD
SUITE E-6
BOCA RATON, FL 33434 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: KARLA SOTO

04/25/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name SOTO, KARLA
Address 9882 GLADES RD SUITE E-6
City-State-Zip: BOCA RATON FL 33434

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: KARLA SOTO

MGR

04/25/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date