

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000147776

Entity Name: SMILE DENTAL ART LLC

Current Principal Place of Business:

8520 NW 11 CT
PEMBROKE PINES, FL 33024

Current Mailing Address:

8520 NW 11 CT
PEMBROKE PINES, FL 33024 US

FEI Number: 85-1391991

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JIMENEZ, SANDRA M
8520 NW 11 CT
PEMBROKE PINES, FL 33024 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 MGR
Name JIMENEZ, SANDRA M
Address 8520 NW 11 CT
City-State-Zip: PEMBROKE PINES FL 33024

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: SANDRA JIMENEZ

SJ

09/13/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date