

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000204546

Entity Name: DENTAL COMMUNITY CENTERS LLC

Current Principal Place of Business:

6300 NE 2ND AVE
SUITE #3
MIAMI, FL 33138

Current Mailing Address:

6300 NE 2ND AVE
SUITE #3
MIAMI, FL 33138 US

FEI Number: 85-3207368

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARMAS, DAVID
6300 NE 2ND AVE
SUITE #3
MIAMI, FL 33138 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 CRESPO, TOMAS
Address 6300 NE 2ND AVE
City-State-Zip: MIAMI FL 33138

Title MGR
Name ARMAS, DAVID
Address 6300 NE 2ND AVE
City-State-Zip: MIAMI FL 33138

Title PRESIDENT, DDS
Name MONGALO , MARCO A
Address 6300 NE 2ND AVE
SUITE #3
City-State-Zip: MIAMI FL 33138

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: MARCO A MONGALO

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05/08/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date