

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000277375

Entity Name: SCHNEIDER DENTAL LLC

Current Principal Place of Business:

3530 MYSTIC POINTE DRIVE
414
AVENTURA, FL 33180

Current Mailing Address:

3530 MYSTIC POINTE DRIVE
414
AVENTURA, FL 33180 US

FEI Number: 85-2875530

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SCHNEIDER, MAURICIO
3530 MYSTIC POINTE DRIVE
414
AVENTURA, FL 33180 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 SCHNEIDER, MAURICIO
Address 3530 MYSTIC POINTE DRIVE # 414
City-State-Zip: AVENTURA FL 33180

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: MAURICIO SCHNEIDER

04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date