

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000280328

**Entity Name:** SOUTH FLORIDA DENTAL LLC

**Current Principal Place of Business:**

6272 NW 170 TERRACE  
MIAMI, FL 33015

**Current Mailing Address:**

6272 NW 170 TERRACE  
MIAMI, FL 33015 UN

**FEI Number: 86-1254851**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

AYSA INTERNATIONAL SERVICE CORP  
6355 NW 36 STREET SUITE  
507  
VIRGINIA GARDENS, FL 33166 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	Title	MGR
Name	RODRIGUEZ, LILIANA	Name	ROJAS, JUAN P
Address	6272 NW 170 TERRACE	Address	6272 NW 170 TERRACE
City-State-Zip:	MIAMI 33015	City-State-Zip:	MIAMI 33015

*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: LILIANA RODRIGUEZ**

**MANAGER**

**04/04/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date