

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000064862

Entity Name: BELLAGIO DENTAL PLLC

Current Principal Place of Business:

517 NORTH LAKE BLVD
#3
NORTH PALM BEACH, FL 33408

Current Mailing Address:

517 NORTH LAKE BLVD
#3
NORTH PALM BEACH, FL 33408 US

FEI Number: 86-2329092

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FARRAH, ROSE
3116 N FLAGLER DR
WEST PALM BEACH, FL 33407 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 MANAGER
Name FARRAH, ROSE
Address 3116 N FLAGLER DRIVE #3
City-State-Zip: WEST PALM BEACH FL 33408

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: ROSE FARRAH

MANAGER

04/29/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date