

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000209255

Entity Name: BENITEZ DENTAL CARE LLC

Current Principal Place of Business:

9361 SW 26TH ST
MIAMI, FL 33165

Current Mailing Address:

9361 SW 26TH ST
MIAMI, FL 33165 US

FEI Number: 86-3935761

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BENITEZ, TAMARA
9361 SW 26TH ST
MIAMI, FL 33165 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 AMBR
Name BENITEZ, TAMARA
Address 9361 SW 26TH ST
City-State-Zip: MIAMI FL 33165

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: TAMARA BENITEZ

AMBR

03/08/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date