

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000529152

Entity Name: LOPEZ DENTISTRY OF SWFL LLC

Current Principal Place of Business:

1008 GOODLETTE RD N
100
NAPLES, FL 34102

Current Mailing Address:

2831 64TH STREET SW
NAPLES, FL 34105

FEI Number: 87-4452275

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, ALEX G
2831 64TH STREET SW
NAPLES, FL 34105 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 LOPEZ, ALEX G
Address 2831 64TH STREET SW
City-State-Zip: NAPLES FL 34105

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: ALEX LOPEZ

MGR

04/30/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date