2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2024
Secretary of State
6693547376CC

DOCUMENT# L22000283581

Entity Name: COASTLINE FAMILY DENTAL LLC

Current Principal Place of Business:

15300 JOG ROAD
SUITE 210
DELRAY BEACH, FL 33446

Current Mailing Address:

15300 JOG ROAD
SUITE 210
DELRAY BEACH, FL 33446 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAHMS, ASHTON
4831 TARPON AVE
BONITA SPRINGS, FL 34134 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	DAHMS, ASHTON
Address	4831 TARPON AVE
City-State-Zip:	BONITA SPRINGS FL 34134

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: ASHTON DAHMS AMBR 01/15/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date