

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000370426

Entity Name: XIMELISDENTAL LAB LLC

Current Principal Place of Business:

28441 S TAMIAMI TRAIL
BONITA SPRINGS, FL 34134

Current Mailing Address:

28441 S TAMIAMI TRAIL
BONITA SPRINGS, FL 34134 US

FEI Number: 61-2055753

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOLEY FORENSIC ACCOUNTING LLC
4100 CORPORATE SQUARE
ST
NAPLES, FL 34104 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 RICARDO XIMELIS, ARLEEN
Address 4152 EVERGLADES BLVD N
City-State-Zip: NAPLES FL 34120

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: ARLEEN RICARDO XIMELIS

MGR

02/06/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date