

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000283990

Entity Name: DA VINCI DENTAL CLINIC LLC

Current Principal Place of Business:

620 N 69 AVE
HOLLYWOOD, FL 33024

Current Mailing Address:

620 N 69 AVE
HOLLYWOOD, FL 33024 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FREEMAN, DENNIS
20801 BISCAYNE BLVD #304
AVENTURA, FL 33180 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 ARDELEAN, GHEORGHE A
Address 620 N 69 AVE
City-State-Zip: HOLLYWOOD FL 33024

Title MGR
Name MINA, ADRIAN
Address 620 N 69 AVE
City-State-Zip: HOLLYWOOD FL 33024

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: ADRIAN MINA

MANAGER

02/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date