## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000512551

Entity Name: TRIBECA DENTAL ARTS LLC

**Current Principal Place of Business:** 

3150 WEST ROLLING HILLS CIRCLE **UNIT 207** 

DAVIE, FL 33328

**Current Mailing Address:** 

3150 WEST ROLLING HILLS CIRCLE

**UNIT 207** 

DAVIE, FL 33328 US

FEI Number: 33-2401921 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ, CARMIN P 1241 SW STARLITE COVE PORT SAINT LUCIE, FL 34986 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

**FILED** Apr 27, 2025

**Secretary of State** 

7028077630CC

## Authorized Person(s) Detail:

Title MGR

GONZALEZ, CARMIN P Name

3150 WEST ROLLING HILLS CIRCLE Address

**UNIT 207** 

SIGNATURE: CARMIN GONZALEZ

City-State-Zip: DAVIE FL 33328

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail

04/27/2025

Date