

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000005858

Entity Name: IMPLANT PARTNERS LLC**Current Principal Place of Business:**5677 AIRLINE ROAD
ARLINGTON, TN 38002**Current Mailing Address:**5677 AIRLINE ROAD
ARLINGTON, TN 38002**FEI Number:** 90-1013180**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DIRECTOR
Name SUN, HONGBIN
Address 5677 AIRLINE ROAD
City-State-Zip: ARLINGTON TN 38002

Title DIRECTOR
Name CHEN, JONATHEN
Address 5677 AIRLINE ROAD
City-State-Zip: ARLINGTON TN 38002

Title VP FINANCE
Name SMITH, TODD
Address 5677 AIRLINE ROAD
City-State-Zip: ARLINGTON TN 38002

Title DIRECTOR
Name SAHAGUN, AURELIO
Address 5677 AIRLINE ROAD
City-State-Zip: ARLINGTON TN 38002

Title VP, GENERAL COUNSEL AND
 SECRETARY
Name OTTINGER, BRADLEY L
Address 5677 AIRLINE ROAD
City-State-Zip: ARLINGTON TN 38002

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: TODD SMITH

VP

05/15/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date