

L25000007351

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PEDIATRIC DENTAL CENTERS OF FLORIDA, LLC**

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COVER LETTER

H25000041276

TO: Registration Section
Division of Corporations

SUBJECT: Pediatric Dental Centers of Florida, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Murphy, Paralegal

Name of Person

Dykema Gossett PLLC

Firm/Company

112 E. Pecan Street, Suite 1800

Address

San Antonio, Texas 78205

City/State and Zip Code

pdcflorida@pediatricdentalcenters.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Murphy

210

554-5317

at (

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

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**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

H25000041276

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: Pediatric Dental Centers of Florida, LLC

SECOND: The Florida Document number of the limited liability company is: L25000009351

THIRD: Document to be corrected is: Articles of Organization For Florida Limited Liability Company

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The principal office address, the mailing address and the street address of the registered agent were erroneously listed in the LLC's Articles of Organization.

As corrected, the LLC's principal office address is 2645 SW 37th Ave., Ste 703, Miami, Florida 33133.

As corrected, the LLC's mailing address is 2645 SW 37th Ave., Ste 703, Miami, Florida 33133.

As corrected, the street address of the LLC's registered agent is 2645 SW 37th Ave., Ste 703, Miami, Florida 33133.

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR

- ☐ The electronic transmission of the record was defective.

Designated by: 

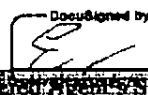

2/2/2025



Signature of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Designated by: 


Filing Fee: \$25.00
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H25000041276

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