

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000109006

Entity Name: KTS ANESTHESIA, LLC

Current Principal Place of Business:

713 FARMER MILL LANE
WEDDINGTON, NC 28104

Current Mailing Address:

713 FARMER MILL LANE
WEDDINGTON, NC 28104 US

FEI Number: 26-3790614

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KERNS, CHRISTINA
2297 NW 72ND TERR
PEMBROKE PINES, FL 33024 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: CHRISTINA KERNS

04/03/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name SCHOLTEN, KIMBERLY T
Address 713 FARMER MILL LANE
City-State-Zip: WEDDINGTON NC 28104

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: KIMBERLY SCHOLTEN

MGRM

04/03/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date