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: DANIEL DAUZAT

Electronic Signature of Signing Authorized Person(s) Detail

FEI Number: 82-4096161

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

DAUZAT, DANIEL J 1237 CELEBRATION AVENUE CELEBRATION, FL 34747 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:

Authorized Person(s) Detail : Title AMBR Title MGRM DAUZAT, DANIEL J Name DAUZAT, DANIEL J Name 1237 CELEBRATION AVENUE Address 1237 CELEBRATION AVENUE Address City-State-Zip: CELEBRATION FL 34747 City-State-Zip: CELEBRATION FL 34747

Current Mailing Address:

1237 CELEBRATION AVENUE CELEBRATION, FL 34747

1237 CELEBRATION AVENUE CELEBRATION. FL 34747

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000015288

Entity Name: SERENE SLUMBER ANESTHESIA LLC

Current Principal Place of Business:

Certificate of Status Desired: Yes

Date

01/08/2021

FILED Jan 08, 2021 Secretary of State 6757958092CC

CRNA

Date