2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 14, 2025
Secretary of State
2768663114CC

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Entity Name: VASCULAR AND INTERVENTIONAL SPECIALISTS, LLC

Current Principal Place of Business:

9175 SW 87 AVE
MIAMI, FL 33176

Current Mailing Address:

9175 SW 87 AVE
MIAMI, FL 33176 US

FEI Number: 35-2639410

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLAYTON, PETER
9100 S DADELAND BLVD
SUITE 1505
MIAMI, FL 33156 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	MGR	Title	MGR
Name	TIE-SHUE, GARY	Name	SOSA M.D., OSCAR AND SPINE
Address	9175 SW 87 AVE	Address	9175 SW 87 AVE
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	MIAMI FL 33176

Title	MGR
Name	CLAYTON, PETER A
Address	9175 SW 87 AVE
City-State-Zip:	MIAMI FL 33176

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: PETER CLAYTON DIRECTOR 04/14/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date