2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 25, 2022
Secretary of State
0065278957CC

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Entity Name: AMBULATORY SURGERY CENTER OF BALA CYNWYD, LLC

Current Principal Place of Business:

660 PALM SPRINGS DRIVE
B
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

660 PALM SPRINGS DRIVE
B
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 84-2365277

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRICOLI, WILLIAM
660 PALM SPRINGS DRIVE
B
ALTAMONTE SPRINGS, FL 32701 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: WILLIAM J. TRICOLI 03/25/2022

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	TRICOLI ENTERPRISES, LLC
Address	1476 LANGHAM TERRACE
City-State-Zip:	HEATHROW FL 32746

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: WILLIAM TRICOLI MGR 03/25/2022

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