

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000016031

Entity Name: FLY HIGH ANESTHESIA SERVICES LLC

Current Principal Place of Business:

6600 MAIN STREET
APT 1206
MIAMI LAKES, FL 33014

Current Mailing Address:

6600 MAIN STREET
APT 1206
MIAMI LAKES, FL 33014 US

FEI Number: 87-4435663

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUCES, JAVIER D
6600 MAIN STREET
APT 1206
MIAMI LAKES, FL 33014 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 AR
Name LUCES, JAVIER D
Address 6600 MAIN STREET
APT 1206
City-State-Zip: MIAMI LAKES FL 33014

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: JAVIER LUCES

DR

04/03/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date