

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000075863

Entity Name: DREAMING TREE ANESTHESIA LLC

Current Principal Place of Business:

4108 KINGSFIELD DR.
PARRISH, FL 34219

Current Mailing Address:

4108 KINGSFIELD DR.
PARRISH, FL 34219 US

FEI Number: 55-0906861

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARMOR, ALECIA
16611 2ND AVE E
BRADENTON, FL 34212 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
Name ARMOR, ALECIA
Address 4108 KINGSFIELD DR.
City-State-Zip: PARRISH FL 34219

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: ALECIA ARMOR

AMBR

01/18/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date