

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000046071

Entity Name: SANTA FE ANESTHESIA MANAGMENT, LLC

Current Principal Place of Business:

2325 DEAN WAY, STE 100
SOUTHLAKE , TX 76092

Current Mailing Address:

2325 DEAN WAY, STE 100
SOUTHLAKE, TX 76092 US

FEI Number: 32-0308821

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KASTNER, NANCY K
206 CANOVA DR
NEW SMYRNA BEACH, FL 32169 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	AUTHORIZED REPRESENTATIVE
Name	PEWITT, KYLE	Name	SEALS, ELISSE
Address	2325 DEAN WAY, STE 100	Address	2325 DEAN WAY, STE 100
City-State-Zip:	SOUTHLAKE TX 76092	City-State-Zip:	SOUTHLAKE TX 76092

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: ELISSE SEALS

MANAGER

01/02/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date