

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000005305

Entity Name: CRITICAL CARE MEDICINE, LLC

Current Principal Place of Business:

8600 SW 92ND STREET
204-A
MIAMI, FL 33156

Current Mailing Address:

8600 SW 92ND STREET
204-A
MIAMI, FL 33156 US

FEI Number: 27-4532983

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOAS, RAUL
8600 SW 92ND STREET
SUITE 5004 204-A
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 MGRM
Name MOAS, RAUL
Address 3659 SOUTH MIAMI AVENUE, SUITE
5004
City-State-Zip: MIAMI FL 33133

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: RAUL MOAS, MD

PRESIDENT

02/23/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date