2025 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L11000111601

Entity Name: SHREEVEN, LLC

FILED
Aug 07, 2025
Secretary of State
9948614106CC

Current Principal Place of Business:

1609 SW 17TH STREET STE 100

OCALA, FL 34471

Current Mailing Address:

1370 E VENICE AVE STE 102 VENICE, FL 34285 US

FEI Number: 45-3461814 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALI, ZAID 1370 E VENICE AVE STE 102 VENICE, FL 34285 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: ZAID ALI 08/07/2025

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title AUTHORIZED MEMBER

Name ASSOCIATES FOR CARDIOVASCULAR

EXCELLENCE, LLC 100% OWNER

Address 1370 E VENICE AVE

STE 102

City-State-Zip: VENICE FL 34285

SIGNATURE: ALAN DEAN

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.

Electronic Signature of Signing Authorized Person(s) Detail

BACK OFFICE ADMINISTRATOR 08/07/2025

Date