

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000149344

Entity Name: VELO ANESTHESIA, LLC

Current Principal Place of Business:

647 EAST PALM AVE
REDLANDS, CA 92374

Current Mailing Address:

647 EAST PALM AVE
REDLANDS, CA 92374 US

FEI Number: 27-2685353

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SABATINI, WILLIAM
647 EAST PALM AVE.
REDLANDS, FL 92374 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 SABATINI, WILLIAM
Address 3025 SALERNO WAY
City-State-Zip: DELRAY BEACH FL 33445

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: WILLIAM L SABATINI

OWNER

01/10/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date