

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000193098

Entity Name: CNS ANESTHETIX, LLC

Current Principal Place of Business:

2171 NW 40TH AVENUE
COCONUT CREEK, FL 33066

Current Mailing Address:

106 ENGLEWOOD STREET
APT A
ALBEMARLE, NC 28001 US

FEI Number: 81-4177921

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SUTHERLAND, KYLA-MAE A
2421 RIVERDALE DRIVE
MIRAMAR, FL 33025 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: KYLA-MAE SUTHERLAND

04/02/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name SCARLETT, CHARLENE N
Address 2171 NW 40TH AVENUE
City-State-Zip: COCONUT CREEK FL 33066

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: CHARLENE SCARLETT

MANAGER

04/02/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date