

**2022 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L17000188009

**Entity Name:** SURGICAL TREATMENT CENTER, LLC

**Current Principal Place of Business:**

831 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

12350 NW 39TH STREET  
SUITE 200  
CORAL SPRINGS, FL 33065 US

**FEI Number:** 82-2682560

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ATHENA MEDICAL MANAGEMENT GROUP, LLC  
12350 NW 39TH STREET  
SUITE 200  
CORAL SPRINGS, FL 33065 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:** JACOB GITMAN

06/09/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGER	Title	AUTHORIZED MEMBER
Name	ATHENA MEDICAL MANAGEMENT GROUP, LLC	Name	ALLEN, LICHT
Address	12350 NW 39TH STREET SUITE 200	Address	12350 NW 39TH STREET SUITE 200
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065

*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:** ALLEN LICHT

AUTHORIZED MEMBER

06/09/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date