

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000046636

Entity Name: CELEBRATION SURGERY CENTER, LLC

Current Principal Place of Business:

7110 CROSSROAD BLVD
STE 200
BRENTWOOD, TN 37027

Current Mailing Address:

7110 CROSSROAD BLVD
STE 200
BRENTWOOD, TN 37027 US

FEI Number: 83-3707180

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 MGR
Name PRATER, JOHN T
Address 7110 CROSSROAD BLVD
STE 200
City-State-Zip: BRENTWOOD TN 37027

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: JOHN T. PRATER

MGR

03/16/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date