

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000027385

Entity Name: E. ZZZ ANESTHESIA LLC.

Current Principal Place of Business:

352 S BISCAYNE BLVD APT 2621
MIAMI, FL 33131

Current Mailing Address:

352 S BISCAYNE BLVD APT 2621
MIAMI, FL 33131

FEI Number: 84-4525843

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ORTIZ, EVELYN
352 S BISCAYNE BLVD APT 2621
MIAMI, FL 33131 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 AMBR
Name ORTIZ, EVELYN
Address 352 S BISCAYNE BLVD APT 2621
City-State-Zip: MIAMI FL 33131

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: EVELYN ORTIZ

AMBR

04/28/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date