

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000149724

Entity Name: ASHTON BURKS ANESTHESIA SERVICES L.L.C.

Current Principal Place of Business:

4062, AMBLE WAY
PACE, FL 32571

Current Mailing Address:

4062
AMBLE WAY
PACE, FL 32571 US

FEI Number: 85-1450264

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BURKS, ASHTON
4062
AMBLE WAY
PACE, FL 32571 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 BURKS, ASHTON B
Address 4062, AMBLE WAY
City-State-Zip: PACE FL 32571

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: ASHTON BURKS

MGR

01/10/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date