

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000226256

**Entity Name:** AZ ANESTHESIA LLC

**Current Principal Place of Business:**

135 GARDENIA ISLES DR.  
PALM BEACH GARDENS, FL 33418

**Current Mailing Address:**

135 GARDENIA ISLES DR.  
PALM BEACH GARDENS, FL 33418 UN

**FEI Number:** 85-2448453

**Certificate of Status Desired:** No

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

NORTHWEST REGISTERED AGENT LLC  
7901 4TH ST. N, STE. 300  
ST. PETERSBURG, FL 33702 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           MANAGER  
Name           ZASLAVSKY, ALEXANDER  
Address        135 GARDENIA ISLES DR.  
City-State-Zip: PALM BEACH GARDENS 33418

*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:** ALEXANDER ZASLAVSKY

MANAGER

01/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date