2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 21, 2024
Secretary of State
4026847889CC

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Entity Name: TRIPLER ANESTHESIA SERVICES LLC

Current Principal Place of Business:

15851 SW 43 TERRACE
MIAMI, FL 33185

Current Mailing Address:

15851 SW 43 TERRACE
MIAMI, FL 33185 US

FEI Number: 88-1460261

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RODRIGUEZ, RUBEN
15851 SW 43 TERRACE
MIAMI, FL 33185 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	RODRIGUEZ, RUBEN
Address	15851 SW 43 TERRACE
City-State-Zip:	MIAMI FL 33185

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: RODRIGUEZ , RUBEN MGR 02/21/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date